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ABSTRACT

Intended as a reference for those interested in designing an occupational therapy curriculum, these curriculum guides are organized from the four levels of performance resulting from an occupational analysis of 15 occupational therapy facilities. These four levels include: (1) occupational therapy aide, (2) occupational therapy technician, (3) occupational therapist, and (4) occupational therapy consultant. The curriculum for each one of these four levels contains an introduction and curriculum modules. The introduction specifies the job description, identifies prior learnings (selection specifications), suggests methods of assembling the modules, and lists affective objectives to be included in each curriculum. The curriculum modules are units of learning which require comprehension and/or application of information. In addition to descriptive information such as job level, module title, and module definition, each module contains: (1) an overall performance objective, (2) related activities, (3) methods for achieving objectives, (4) suggested teaching strategies, (5) suggested evaluation techniques, and (6) suggested instructional media. The suggested teaching strategies, evaluation techniques, and resources are listed in separate publication available as VT 020 340 in this issue. Other related documents are available as VT 020 338, and VT 020 341 in this issue. (SB)

ED 078171

DEVELOPMENT OF OCCUPATIONAL THERAPY JOB DESCRIPTIONS AND CURRICULA THROUGH TASK ANALYSIS

REPORT NUMBER TWO

OCCUPATIONAL THERAPY CURRICULUM GUIDES DEVELOPED THROUGH A TASK ANALYSIS PROCEDURE

SCHOOL OF ALLIED MEDICAL PROFESSIONS
College of Medicine
The Ohio State University
Columbus, Ohio 43210

Grant No. 5 D02 AH 00964 01, 2

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Department of Health, Education and Welfare
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Report Number Two
Department of Health, Education and Welfare
Grant #5 D02 AH 00964 01, 2
conducted under the direction of
Kathryn T. Schoen, Ph. D.

"Development of Occupational Therapy Job Descriptions
and Curricula Through Task Analysis"

OCCUPATIONAL THERAPY CURRICULUM GUIDES DEVELOPED THROUGH A TASK ANALYSIS PROCEDURE

John S. Camiscioni, M.A.,
Co-Director
Rosa M. Hartsook, O.T.R.,
Project Administrator
Robert S. Bloom, M. Ed.,
Curriculum Specialist
Gwyn D. Angus, Ph.D.,
Evaluation Specialist
Laurie H. Jones, A.B.,
Research Assistant

SCHOOL OF ALLIED MEDICAL PROFESSIONS
College of Medicine
The Ohio State University
Columbus, Ohio 43210

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PREFACE

These curriculum guides are intended to be an aid and reference document for those people who are interested in designing an Occupational Therapy curriculum. The design may include anything from the development of a new course to the establishment of a totally new curriculum.

The data for the development of these guides were collected through a task analysis and job structuring procedure adapted from those used by the United States Department of Labor. The procedures in the development of these guides included the following:

1. Identification and assessment of the duties and tasks being performed in occupational therapy facilities. This information was collected by trained Occupational Analysts and Occupational Therapists.
2. Assessment of the list of duties and tasks, by sixty-three occupational therapy educators and practitioners, to identify missing activities or delete non-relevant activities.
3. Division of duties and tasks into job levels based on the educational and vocational level of training needs for each duty and task.
4. Development of job descriptions for each job level.
5. Development of performance objectives (similar to behavioral objectives except they do not specify criteria for assessment) for the duties and tasks in each level based on processes and products specified in each duty and task.
6. Identification of content for each performance objective.
7. Development of curriculum modules which include performance objectives, suggested teaching strategies, resources, evaluation procedures, and suggested content.
8. Identification of module sequence within each level to facilitate concurrent and subsequent learning.

A detailed step-by-step explanation of the curriculum guide development process is contained in another manual developed by the project staff.

The curriculum guides have a very sound empirical base, but the contents of this document are intended as suggestions. This project has undergone exhaustive evaluations by well over a hundred educators and practitioners in occupational therapy, but the ultimate evaluation of the utility of these guides will be found in the performance of students educated with the assistance of these guides.

ACKNOWLEDGMENTS

Many people have provided guidance and input for the development of the curriculum guide contained in this volume. The staff would like to express their sincere thanks to all who contributed their time and efforts to this project. Excellent cooperation was provided by occupational therapy consultants, including members of the faculty of the School of Allied Medical Professions, The Ohio State University, and members of the Planning Advisory Committee.

Occupational Therapy Consultants

Mary K. Bailey, O.T.R.
Chief
Occupational Therapy Department
Johns Hopkins Hospital
Baltimore, Maryland

Betty Cox, C.O.T.A.
Director
Program Development
Stella Mavis Hospice
Towson, Maryland

Nedra Gillette, O.T.R.
Instructor
Columbia University Occupational Therapy Curriculum
New York, New York

Helen Hopkins, M.A., O.T.R.
Assistant Professor
Occupational Therapy
Temple University
Philadelphia, Pennsylvania

Alice C. Jantzen, Ph.D.
Professor and Chairman
College of Health Related Professions
University of Florida
Gainesville, Florida

Virginia T. Kilburn, M.A., O.T.R.
Director of Professional Education Services
American Occupational Therapy Association
New York, New York

Anne Murany, M.A., O.T.R.
Professor
Occupational Therapy Department
San Jose State College
San Jose, California

Members of the Faculty, Occupational Therapy Division, School of Allied Medical Professions, The Ohio State University

Margaret J. Adamson, M.A., O.T.R.
Assistant Professor

Janet Johnson, M.S., O.T.R.
Assistant Professor

Barbara Locher, O.T.R., M.P.S.
Professor

Lois Mills, O.T.R.
Former Media Project Coordinator

C. Kay Buckey White, O.T.R.
Assistant Professor

Planning Advisory Committee

Robert J. Atwell, M.D.
Director
School of Allied Medical Professions
The Ohio State University
Columbus, Ohio

Clyde Butz, M.P., O.T.R.
Director
Division of Functional Programming
State of New York
Department of Mental Hygiene
Division of Mental Health
Albany, New York

Florence Cromwell, M.A., O.T.R.
Adjunct Associate Professor
University of Southern California
Occupational Therapy Department
Los Angeles, California

Charles W. Dohner, Ph.D.
Director
Office of Research in Medical Education
School of Medicine
The University of Washington
Seattle, Washington

Helen K. Grant, M.S., O.T.R.
Director
Occupational Therapy Division
School of Allied Medical Professions
The Ohio State University
Columbus, Ohio

Elizabeth Gurney, Consultant
Health Occupations Trade and Industrial Education
Ohio Department of Education
Columbus, Ohio

Paul Klohr, Ph.D.
Professor of Education
College of Education
The Ohio State University
Columbus, Ohio

Cornelius Kooiman, M.A., O.T.R.
Director
School of Occupational Therapy
Virginia Commonwealth University
Richmond, Virginia

W. Loren Williams, Jr., Ph.D.
Professor of Psychology and
Director, Division of Educational Research and
Development
Medical College of Georgia
Augusta, Georgia

Appendix C is a compilation of instructional resources which were suggested by occupational therapy educators and practitioners. Descriptive material for overhead transparencies, games and simulations, programed instruction, slides, video tapes, filmstrips, and film loops are included courtesy of each distributor. Annotations for 16 MM films are from the following distributor catalogues:

1968 and 1970 Film Reference Guide For Medicine and Allied Sciences
Department of Health, Education, and Welfare, Public Health Services
National Institutes of Health
National Library of Medicine
National Audiovisual Center
Atlanta, Georgia 30333

1969 Medical and Surgical Motion Pictures
American Medical Association
Section on Medical Motion Pictures and Television
535 North Dearborn Street
Chicago, Illinois 60610

State Department of Public Welfare
Division of Mental Hygiene
1 West Wilson Street, Room 344
Madison, Wisconsin 53703

1971 University of Iowa Film Catalog
Division of Extension and University Services
Audiovisual Center
The University of Iowa
Iowa City, Iowa 52240

1969-70 University of Southern California Films
University of Southern California
University Park
Los Angeles, California 90007

OCCUPATIONAL THERAPY CURRICULUM GUIDES

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INTRODUCTION

These curriculum guides are organized from the four levels of performance identified in the occupational analysis of occupational therapy facilities. The four levels have been titled as follows:

Occupational Therapy Aide (Program Support)

Occupational Therapy Technician (Program Implementation)

Occupational Therapist (Program Supervision)

Occupational Therapy Consultant (Program Development)

Each guide contains an introduction and curriculum modules.

Each introduction specifies the job description, identifies prior learnings (selection specifications), suggests methods of organizing and assembling the modules and lists affective objectives to be included in each curriculum.

Curriculum modules are units of learning which will require comprehension and/or application of information. The term "module" does not equate to a unit of time and, therefore, should not be confused with the term "course". It may be possible to divide a module into two or more courses, or combine certain modules into a single course.

Each module will be classified as one of three types. The three types of modules and their definitions are as follows:

1. BASIC INFORMATION MODULE - provides knowledge which is considered necessary background information needed to perform skills delineated in both the Information-Application and Clinical Application modules defined below.

2. INFORMATION-APPLICATION MODULE - provides basic skills (and related knowledges) that constitute essential performances in occupational therapy.

3. CLINICAL APPLICATION MODULE - provides complex performance which students must apply and practice in simulated or actual clinical situation. Each Clinical Application Module may stress the simultaneous application of two or more of the Information-Application Modules.

The sample module on page 4 indicates the overall organization and titles of eleven major components. This same format is maintained throughout the guide. The first four components of each module,

(1. Level of Job Preparation, 2. Module Type, 3. Module Title, and 4. Module Definition), are self-explanatory. The seven remaining components are defined as follows:

5. Overall Performance Objective - indicate knowledge and skills to be obtained by the learner as he progresses through the module.

6. Related Activities in Occupational Therapy - indicate the "why" or reasons for the overall performance objectives and their direct relationship with the learner's eventual performance in occupational therapy.

7. Suggested Objectives - indicate possible methods for relating the desired overall performance to specific learner activities.

8. Examples - include content examples for some of the objectives.

9. Suggested Teaching Strategies - indicate four instructional procedures by which learners might be taught:

   1. Direct Communication

   2. Teacher-Student Group

   3. Student-Student Group

   4. Student Independent.

   Although it is likely that each of the four procedures can be used in each of the modules, experts in instructional technology have rated the procedures and placed them in priority order for each module (e.g., Student-Independent was judged to be the best teaching method for the sample module). Appendix A describes the four procedures in detail and gives numerous examples for each.

10. Suggested Evaluation - indicates sample techniques for testing or assessing learner skills and knowledges. The various techniques suggested by experts in the field of evaluation are taken from the following:

    1. True-False

    2. Multiple Choice

    3. Matching

    4. Completion

5. Essay

6. Listing

7. Observational Techniques.

Suggested evaluation techniques for each module are listed under item 10. Evaluation techniques priorities for a variety of learning levels and competencies are suggested in the chart on page B-6 of Appendix B. Appendix B also contains a description of each technique, including the advantages and disadvantages of each.

11. Suggested Instructional Media - indicate sample audio-visual materials and bibliographies related to module content. The resources are coded in the module and described in Appendix C.

Module interrelationships between each educational level are illustrated in the table on page 5. This table lists the module titles at each level and specifies those modules which are equivalent to or contain aspects of content at the next level.

1. *Level of Job Preparation* →

PREPRATION FOR OCCUPATIONAL THERAPY TECHNICIAN

2. *Module Type* → INFORMATION-APPLICATION MODULE

3. *Module Title* → 4. *Module Definition* →

Independent Problem-Solving: Applied analysis of personal needs and implementation of techniques to improve personal knowledge and skills.

5. *Overall Performance Objectives:* 1) To analyze and determine personal knowledge and skill needs, 2) to seek and find resources for meeting those needs, and 3) to implement self-education in the area of need.

6. *Related Activities in Occupational Therapy:* To maintain and improve skills and knowledge in occupational therapy.

7. *Suggested Objectives:* The Learner Should:	8. *Examples*
1. Analyze his proficiency lacks and his interest and determine in what general area he wishes to improve his skills.	ADL instruction. Interpersonal relationships. Group process.
2. Write a plan for independent study using previously learned methods of educational planning.	
3. Implement the plan by applying appropriate problem-solving behavior.	
4. Evaluate the effectiveness of his plan and the usefulness of the information.	Plan feasible? Plan realistic? Information useful? Applicable?

9. *Suggested Teaching Strategy:* (*See Appendix A*)
   Student-Independent, p. A-8

10. *Suggested Evaluation:* (*See Appendix B*)
    Essay, p. B-11

11. *Suggested Resources:* (*See Appendix C*)
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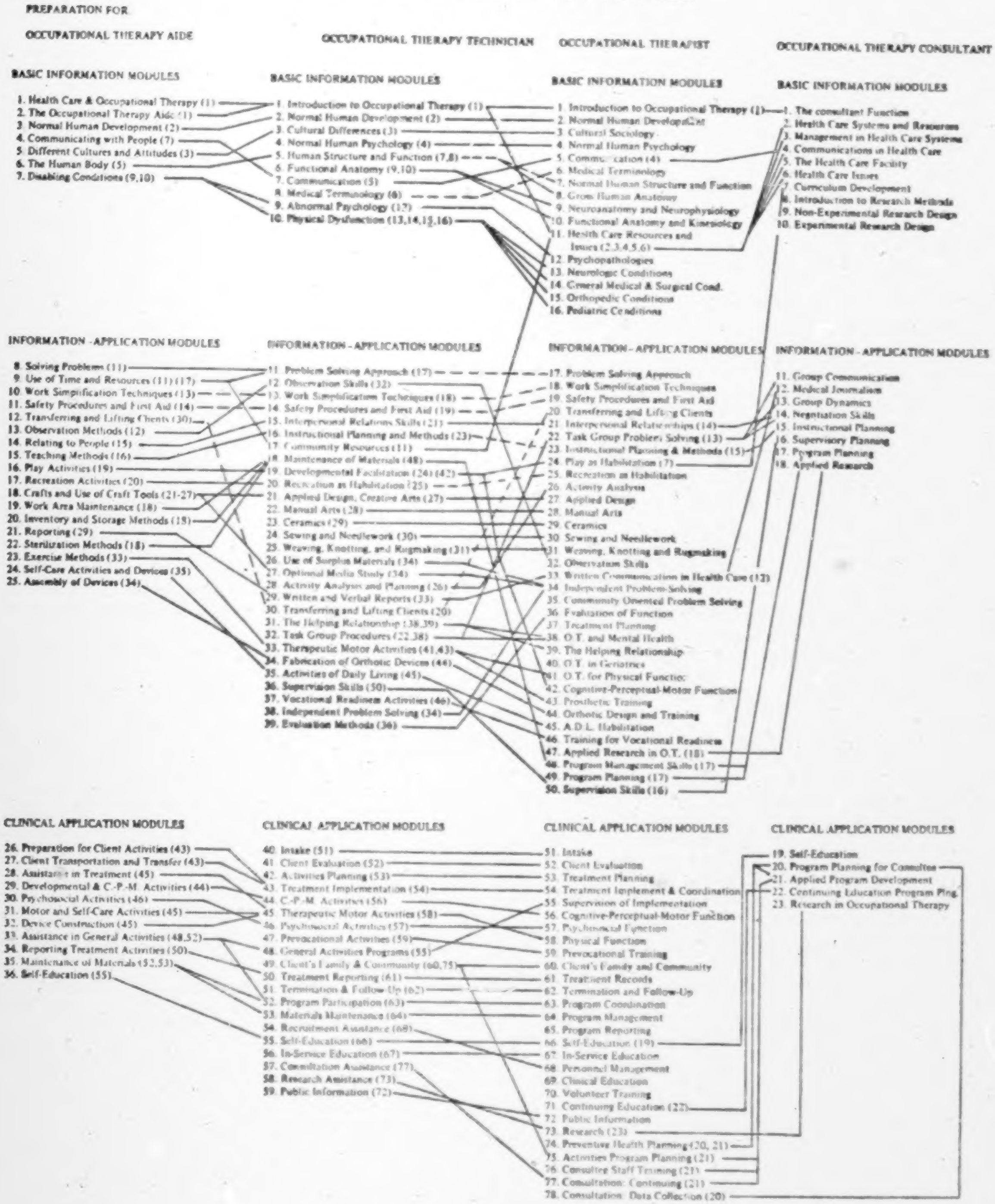
INSTRUCTIONAL MODULE INTERRELATIONSHIPS
AMONG FOUR LEVELS OF PREPARATION IN OCCUPATIONAL THERAPY



PREPARATION FOR
OCCUPATIONAL THERAPY AIDE

BASIC INFORMATION MODULES

1. Health Care & Occupational Therapy (1)
2. The Occupational Therapy Aide (1)
3. Normal Human Development (2)
4. Communicating with People (7)
5. Different Cultures and Attitudes (3)
6. The Human Body (5)
7. Disabling Conditions (9,10)

INFORMATION - APPLICATION MODULES

8. Solving Problems (11)
9. Use of Time and Resources (11) (17)
10. Work Simplification Techniques (13)
11. Safety Procedures and First Aid (14)
12. Transferring and Lifting Clients (30)
13. Observation Methods (12)
14. Relating to People (15)
15. Teaching Methods (16)
16. Play Activities (19)
17. Recreation Activities (20)
18. Crafts and Use of Craft Tools (21-27)
19. Work Area Maintenance (18)
20. Inventory and Storage Methods (18)
21. Reporting (29)
22. Sterilization Methods (18)
23. Exercise Methods (33)
24. Self-Care Activities and Devices (35)
25. Assembly of Devices (34)

CLINICAL APPLICATION MODULES

26. Preparation for Client Activities (43)
27. Client Transportation and Transfer (43)
28. Assistance in Treatment (45)
29. Developmental & C.-P.-M. Activities (44)
30. Psychosocial Activities (46)
31. Motor and Self-Care Activities (45)
32. Device Construction (45)
33. Assistance in General Activities (48,52)
34. Reporting Treatment Activities (50)
35. Maintenance of Materials (52,53)
36. Self-Education (55)

OCCUPATIONAL THERAPY TECHNICIAN

BASIC INFORMATION MODULES

1. Introduction to Occupational Therapy (1)
2. Normal Human Development (2)
3. Cultural Differences (3)
4. Normal Human Psychology (4)
5. Human Structure and Function (7,8)
6. Functional Anatomy (9,10)
7. Communication (5)
8. Medical Terminology (6)
9. Abnormal Psychology (12)
10. Physical Dysfunction (13,14,15,16)

INFORMATION - APPLICATION MODULES

11. Problem Solving Approach (17)
12. Observation Skills (32)
13. Work Simplification Techniques (18)
14. Safety Procedures and First Aid (19)
15. Interpersonal Relations Skills (21)
16. Instructional Planning and Methods (23)
17. Community Resources (11)
18. Maintenance of Materials (48)
19. Developmental Facilitation (24) (42)
20. Recreation as Habilitation (25)
21. Applied Design, Creative Arts (27)
22. Manual Arts (28)
23. Ceramics (29)
24. Sewing and Needlework (30)
25. Weaving, Knotting, and Rugmaking (31)
26. Use of Surplus Materials (34)
27. Optional Media Study (34)
28. Activity Analysis and Planning (26)
29. Written and Verbal Reports (33)
30. Transferring and Lifting Clients (20)
31. The Helping Relationship (38,39)
32. Task Group Procedures (22,38)
33. Therapeutic Motor Activities (41,43)
34. Fabrication of Orthotic Devices (44)
35. Activities of Daily Living (45)
36. Supervision Skills (50)
37. Vocational Readiness Activities (46)
38. Independent Problem Solving (34)
39. Evaluation Methods (36)

CLINICAL APPLICATION MODULES

40. Intake (51)
41. Client Evaluation (52)
42. Activities Planning (53)
43. Treatment Implementation (54)
44. C.-P.-M. Activities (56)
45. Therapeutic Motor Activities (58)
46. Psychosocial Activities (57)
47. Prevocational Activities (59)
48. General Activities Programs (55)
49. Client's Family & Community (60,75)
50. Treatment Reporting (61)
51. Termination & Follow-Up (62)
52. Program Participation (63)
53. Materials Maintenance (64)
54. Recruitment Assistance (68)
55. Self-Education (66)
56. In-Service Education (67)
57. Consultation Assistance (77)
58. Research Assistance (73)
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OCCUPATIONAL THERAPIST

BASIC INFORMATION MODULES

1. Introduction to Occupational Therapy (1)
2. Normal Human Development
3. Cultural Sociology
4. Normal Human Psychology
5. Communication (4)
6. Medical Terminology
7. Normal Human Structure and Function
8. Gross Human Anatomy
9. Neuroanatomy and Neurophysiology
10. Functional Anatomy and Kinesiology
11. Health Care Resources and Issues (2,3,4,5,6)
12. Psychopathologies
13. Neurologic Conditions
14. General Medical & Surgical Cond.
15. Orthopedic Conditions
16. Pediatric Conditions

INFORMATION - APPLICATION MODULES

17. Problem Solving Approach
18. Work Simplification Techniques
19. Safety Procedures and First Aid
20. Transferring and Lifting Clients
21. Interpersonal Relationships (14)
22. Task Group Problem Solving (13)
23. Instructional Planning & Methods (15)
24. Play as Habilitation (7)
25. Recreation as Habilitation
26. Activity Analysis
27. Applied Design
28. Manual Arts
29. Ceramics
30. Sewing and Needlework
31. Weaving, Knotting and Rugmaking
32. Observation Skills
33. Written Communication in Health Care (12)
34. Independent Problem-Solving
35. Community Oriented Problem Solving
36. Evaluation of Function
37. Treatment Planning
38. O.T. and Mental Health
39. The Helping Relationship
40. O.T. in Geriatrics
41. O.T. for Physical Function
42. Cognitive-Perceptual-Motor Function
43. Prosthetic Training
44. Orthotic Design and Training
45. A.D.L. Habilitation
46. Training for Vocational Readiness
47. Applied Research in O.T. (18)
48. Program Management Skills (17)
49. Program Planning (17)
50. Supervision Skills (16)

CLINICAL APPLICATION MODULES

51. Intake
52. Client Evaluation
53. Treatment Planning
54. Treatment Implement & Coordination
55. Supervision of Implementation
56. Cognitive-Perceptual-Motor Function
57. Psychosocial Function
58. Physical Function
59. Prevocational Training
60. Client's Family and Community
61. Treatment Records
62. Termination and Follow-Up
63. Program Coordination
64. Program Management
65. Program Reporting
66. Self-Education (19)
67. In-Service Education
68. Personnel Management
69. Clinical Education
70. Volunteer Training
71. Continuing Education (22)
72. Public Information
73. Research (23)
74. Preventive Health Planning (20, 21)
75. Activities Program Planning (21)
76. Consultee Staff Training (21)
77. Consultation: Continuing (21)
78. Consultation: Data Collection (20)

OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULES

1. The consultant Function
2. Health Care Systems and Resources
3. Management in Health Care Systems
4. Communications in Health Care
5. The Health Care Facility
6. Health Care Issues
7. Curriculum Development
8. Introduction to Research Methods
9. Non-Experimental Research Design
10. Experimental Research Design

INFORMATION - APPLICATION MODULES

11. Group Communication
12. Medical Journalism
13. Group Dynamics
14. Negotiation Skills
15. Instructional Planning
16. Supervisory Planning
17. Program Planning
18. Applied Research

CLINICAL APPLICATION MODULES

19. Self-Education
20. Program Planning for Consultee
21. Applied Program Development
22. Continuing Education Program Plng.
23. Research in Occupational Therapy

Legend:

broken line — — — indicates: equal or same module
solid line ——— indicates: relates to or contains aspects of

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

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Curriculum Guide for the Preparation of:
Occupational Therapy Aide

INTRODUCTION

THE OCCUPATIONAL THERAPY AIDE FUNCTION

The data based for development of this curriculum guide is the job description developed during the first year of this project, of which a summary is presented below. Comprehensive job descriptions are presented in the Job Description Manual. Complete descriptions of the project procedures for development of the job descriptions and the curriculum guides are presented in the Procedure Manual from this project.

This curriculum guide has been develop to prepare individuals to perform the following tasks:

Occupational Therapy Aide (Program Support)

General Definition: Assists occupational therapy staff in treating and training clients with psychosocial or physical dysfunction by implementing programs designed to habilitate or rehabilitate clients in hospital or other setting:

Confers with occupational therapist or staff specialist to arrange details of daily work schedule, following professional instructions and treatment plan. Escorts client to and from treatment or training area by instructing and aiding client into wheelchair, assisting client in pushing wheelchair, and walking with or assisting client to area. Aids client by supporting or lifting and positioning into and out of bed, wheelchair, or stand-in-table. Guides client through workshop by touring and explaining kind, location, and use of equipment while adapting explanation and method of tour to client's capabilities. Organizes clients into groups and distributes arts and crafts materials and supplies. Assists client during therapeutic activity by explaining activity to client, observing performance, praising and encouraging appropriate responses, and changing activity according to attention span of client. Aids client by leading such group activities as card games, music, gardening, singing, and such special events as parties and picnics. Observes client for signs of fatigue and distress and adjusts activities appropriately. Exchanges information *concerning client with other staff by observing and reporting his behavior and by attending meetings in which client treatment is discussed.*

Reports attendance by tabulating number of clients, names, and times attended, and by posting data according to established procedures. Completes accident or incident reports by following prescribed procedures.

Fabricates, modifies, or adapts slings, splints, and self-help devices to assist client in obtaining optimal physical independence by forming, cutting, and sewing materials and attaching fasteners according to directions. Informs supervisor of discomfort and poor fit of splint or device by observing and reporting white or red pressure spots on client extremities.

Maintains occupational therapy work areas by cleaning, transporting, storing, and inspecting materials, equipment, and supplies.

Performs related duties: Receives continuing education and training by participating in programs to up-grade job knowledge and to aide in keeping abreast of developments in field. May entertain clients by securing films and operating projector, or by assisting volunteer entertainers.

Qualifications for Entry into the Curriculum

In order to delineate the attitudes, aptitudes, and educational level required for entry into each curriculum level, selection specifications were developed. (Detailed description of their development is included in Appendix D of this volume.) The selection specifications for entry into the Occupational Therapy Aide Curriculum are:

1. Have a GED level of 3. (The specific General Educational Development Scale for level 3 may be found on page 11 .)
2. Have a preference for working with people, as in the social welfare sense.
3. Desire situations involving people and the communication of ideas.
4. Desire activities of a routine, concrete, organized nature.
5. Desire activities dealing with things and objects.
6. Be able to adjust to duties characterized by frequent change.
7. Desire to deal with people beyond giving and receiving instruction.

GENERAL EDUCATIONAL DEVELOPMENT SCALE LEVEL III (GRADES 7-8)*

Language Development	Language Curriculum		Reasoning Development	Mathematical Development	Mathematics Curriculum	
Selective reading of textbooks, and other materials to extract essential theme or idea. Compose themes, reports and essays, following rules of grammar, spelling, neatness and format.	Punctuation:	Comma, colon, semi-colon, dash, parentheses, quotation marks, hyphen, abbreviations.	Apply commonsense understanding to carry out instructions furnished in written, oral or diagrammatic form. Deal with problems involving several concrete variables in or from standardized situations.	Computer discount, interest, percentage, surface areas, values, weights and measures, using four basic arithmetic operations.	Whole Numbers:	Mastery of the four basic arithmetic operations. Emphasis on speed and accuracy in computation. Extension to 4- and 5-digit multipliers and divisors.
	Reference Works:	Utilize dictionary to learn alphabetical order, guide works, diacritical marks, synonyms and antonyms. Use encyclopedia, atlases, magazines and source books to prepare class assignments.			Fractions:	Mastery of the four basic arithmetic operations in common, decimal and improper fractions and mixed numbers. Apply knowledge to solve "story problems". Develop speed and accuracy in changing fractions into percent and percent into fractions. Memorize most common equivalents, such as halves, quarters, eights, fifths, thirds, sixths and twelfths, and mentally convert them to decimal fractions and percents.
	Handwriting:	Develop individualized style of writing.			Percentage Formulas:	Memorize and apply formulas to solve "story problems", as $P=RB \quad R=\frac{P}{B} \quad B=\frac{P}{R}$
	Grammar:	Learn concepts of person, genda, number, case, tense, mood and voice. Learn kinds of verbs, nouns, pronouns, adjectives, adverbs, conjunctions, propositions. Learn to diagram sentences. Learn normal and inverted word order, contractions, agreement of subjects and verbs, pronouns and antecedents.			Measurements:	Perform the four basic arithmetic functions to solve problems involving different units of same type of measurement, as Time 4 wks, 6 days 32 hrs. +2 wks, 3 days 25 hrs.
	Reading:	Read to find main thought or idea of a paragraph. Locate topic and summary sentence, and identify details and relate them to central thought.			Graphs:	Learn to construct and interpret line, bar and picture graphs. Convert degrees to percent to draw circle graphs.
	Composition:	Prepare themes, reports and essays, with greater emphasis placed on punctuation, spelling, grammar, format, style, neatness, arrangement and comprehensive coverage of subject matter.			Percentage:	Apply knowledge of percentage to computer interest, discount, etc.
	Speaking:	Practice speaking before an audience to acquire poise, self-control and confidence. Participate as group leader or group member in planned informal discussion. Participate in class elections and persuade others to vote for him or his candidate.			Geometry:	Recognize and understand meanings of terms such as horizontal, vertical, perpendicular, oblique and obtuse. Learn numbers of degrees in a circle, relationship between angles and degrees; types of triangles, equilateral, Isosceles, right and obtuse. Types of parallelograms: oblong, square, rhomboid and rhemus. Learn formulas for finding area of geometric figures.
					Algebra:	Learn use of symbols for numbers, terms such as exponent and power. Learn to find square roots.
					Ratio & Proportion:	Learn to use ratio and proportion to solve problems.

*From: Guide for Relating General Educational Development to Educational Curriculum. U. S. Department of Labor, Manpower Administration, 1971.

8. Desire activities involving the evaluation of information against judgmental criteria.
9. Desire indoor employment.
10. Desire a job involving light or sedentary physical activities.
11. Be able to devote up to 3 months to training.

The job description lists the performances expected of the learner at the completion of the curriculum; the selection specifications are the requirements for entry into the curriculum; the curriculum guide suggests learning experiences which enable an individual who meets the selection specifications to obtain competencies required for job performance.

Some suggestions for structuring the Occupational Therapy Aide Curriculum are provided in the following paragraphs.

DEVELOPMENT OF CURRICULUM FOR THE OCCUPATIONAL THERAPY AIDE

The modules were designed as "building blocks" for learning knowledges and skills. Each module is probably related to all of the others in some fashion; however, these module "blocks" may be put together in many varied ways. The aide level curriculum differs from the other levels. It is assumed that most aide level education and training will occur in an in-service, on-the-job, or work-study situation. It is possible that clinical applications will occur simultaneously with learning of basic information and information-application. This reflects the idea that learning be accomplished by first providing work-related experiences and then reinforcing these experiences with knowledge and skill content. Assembly of coursework may be more oriented to on-the-job learning than to formal classroom learning in many settings. Planning for coursework assembly may be approached as four interrelated processes.

1. Clustering modules to develop tentative course work.
2. Sequencing to include placement of course work in a learning continuum.
3. Assembly of course work to include instructional objectives, instructional strategies, media, evaluation methods and time span of course.
4. Determination and placement of affective learning.

1. Module Clusters. Decisions must be made as to how modules will be grouped. Each module will remain as is, be combined with others, or be divided to form a course of study. Several approaches are possible.

The chart on page 14 indicates a number of ways in which modules may be clustered. They may be read in the same manner as a mileage chart on a road map. Each module is listed across both the vertical and horizontal axes. Each of the cells on the chart contains a letter which indicates a relationship between a module on the vertical axis and a module on the horizontal axis. Suggested relationships between modules are keyed as follows:

I = the two modules may be learned independently of each other.
R = the modules are related to each other. There is a potential for sequencing the two modules along a linear time continuum.
C = module content provides close intrinsic relationship and may potentially be clustered.
S = the modules may be learned simultaneously or concurrently in time. Content areas are extrinsically related, and each may enhance the learning of the other.
/ = may be read as "or" or "and". In some cases, when 2 modules are related (R) to each other, aspects of each may be clustered (C) or learned simultaneously (S).

Assume that one wanted to determine the relationship between two modules - for example, module #10 "Work Simplification" and module #20 "Inventory and Storage Methods". Locate #10 on the vertical axis and #20 on the horizontal axis. At the point where the lines for #10 and #20 cross may be found the code "*R/S*" which indicates that the two are related to each other and that it might be beneficial to learn them simultaneously (but not clustered into the same academic course). The determination of module relationships is the responsibility of the guide user. The suggestions presented in the chart on page 14 should provide guidance for this task.

2. Sequencing of course work. Decisions concerning placement of course work in a learning continuum are interdependent with decisions concerning course work content. Consideration must be given to prior, concurrent, and subsequent learning for each course.

For example, should the module "Client Transportation" be learned prior to, concurrent with, or after the modules "Safety and First Aid" and "Work Simplification"? These decisions are dependent upon the course content

SUGGESTED MODULE RELATIONSHIPS FOR SEQUENCING AND CLUSTERING THE OCCUPATIONAL THERAPY AIDE MODULES

Legend
I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

	Clinical Application											Information Application																		Basic Information						
	36. Self Education	35. Materials Maintenance	34. Reporting Tx.	33. General Activities	32. Device Construction	31. Motor & A.D.L. Act.	30. Psychosocial Act.	29. Devel. & C.P.M. Act.	28. Tx. Assistance	27. Client Transportation	26. Tx. Preparation	25. Device Assembly	24. Self-Care & Devices	23. Exercise Methods	22. Stimulation Methods	21. Reporting	20. Inventory & Storage	19. Work Area Maintenance	18. Crafts & Craft Tools	17. Recreation	16. Play Activities	15. Teaching Methods	14. Relating to People	13. Observation Method	12. Client Transfer	11. Safety & First Aid	10. Work Simplification	9. Use of Time & Resources	8. Solving Problems	7. Disabling Conditions	6. The Human Body	5. Diff. Cultures & Attitudes	4. Communicating with People	3. Normal Human Development	2. The O.T. Aide	1. Health Care & O.T.
Basic Information																																				
1. Health Care & O.T.	C	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R/S	R/S	R	R	R	R	R		
2. The O.T. Aide	C	R/S	R	R/S	R	R	R	R	R/S	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R/S	R/S	R/S	R	R	R			
3. Normal Human Development	C	I	R	R/S	I	R/S	R/S	R/S	R/S	R	R	R	R	R	I	R/S	R	R	R	R/S	R/S	R/S	R	R	R	R	R	R	R/S	R	R	R				
4. Communicating with People	C	R	R/S	R/S	R	R/S	R/S	R/S	R/S	R	R	R	R/S	R	R	R/S	R	R	R	R	R	R/S	I	R/S	R	R	R	R	R/S	R	R					
5. Diff. Cultures & Attitudes	C	I	R	R/S	I	R/S	R/S	R/S	R/S	R	R	I	R/S	I	I	R	I	R	R	R	R	R/S	R/S	R	R	R	R	R	R/S	R						
6. The Human Body	C	R	R	R	R	R/S	R	R	R	R	R	R	R/S	R/S	R	R	R	R	R	R	R	R	R	R	R	R/S	R	R	R/S							
7. Disabling Conditions	C	R	R/S	R/S	R	R/S	R/S	R/S	R/S	R/S	R	R	R/S	R/S	R/S	R/S	R	R	R	R	R	R	R	R/S	R/S	R/S	R	R	R/S							
Information Application																																				
8. Solving Problems	C	R/S	R	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R	R	R/S	R/S	R/S	R/S								
9. Use of Time & Resources	C	R/S	R	C	R/S	R/S	R/S	R/S	R/S	R	R/C	R/S	R/S	R/S	R/S	R	R/C	R/S	R/S	R/S	R/S	R	R	R	R	R	R									
10. Work Simplification	I	R/S	R	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	C	R/S	R/S	R	R/S	R/S	R	R	R	R/S	R	R	R_S	R										
11. Safety & First Aid	C	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	R/S	C	R/S	R/S	R/S	R/S	R/S	R/S	R	R	R	R/S											
12. Client Transfer	C	I	R	R/S	I	R/S	R	R	R/S	I	R/C	I	R/S	R/S	I	R	R	R	R	R	R	R	R	R												
13. Observation Methods	C	R	R/S	R/S	R	R/S	R/S	R/S	R/S	R	R	R	R/S	R/S	R	R/S	R	R	R/S	R/S	R/S	R/S	R/S													
14. Relating to People	C	R	R	R/S	R	R/S	R/S	R/S	R/S	R	R	R	R/S	R/S	I	R	I	R	R/S	R/S	R/C	R/S														
15. Teaching Methods	C	I	R	R/S	I	R/S	R/S	R/S	R/S	R	R	I	R/S	R/S	I	R	I	I	R/C	R/C	R/C															
16. Play Activities	C	R/S	R	R/S	I	R	R/S	I	R/S	I	R	I	R	R	R	R	R	R	R/S	R/S																
17. Recreation	C	R/S	R	C	I	R	R/S	R/S	R/S	I	R	I	R	R	I	R	R	R	R/S																	
18. Crafts & Craft Tools	C	R/S	R	C	R	R	R/S	R/S	R/S	I	R	R	R	R	R/S	R	R	R																		
19. Work Area Maintenance	C	C	I	C	R	R	R	R	R/C	I	R/C	R	R	R	R/S	R	C																			
20. Inventory & Storage	C	C	I	C	R	R	R	R	R/C	I	R/S	R	R	I	R	R/C																				
21. Reporting	C	R	R/C	R	R	R_C	R_C	R_C	R/S	R	R	R	R/S	R/S	R																					
22. Stimulation Methods	C	C	I	I	I	R	I	I	R/S	I	R/C	I	R	I																						
23. Exercise Methods	C	R	R	R	R	R	R	R	R/S	I	R	R	R																							
24. Self-Care & Devices	C	R	R	R	R	C	R	R	R/S	R/S	R	R/S																								
25. Device Assembly	C	R/S	R	I	C	R/S	[illegible]	I	R/S	I	R																									
Clinical Application																																				
26. Tx. Preparation	C	R/S	R	R/C	R/C	R/S	R/C	R/C	R/C	R/C																										
27. Client Transportation	C	I	I	R	I	R/S	R	R	R/S																											
28. Tx. Assistance	C	R	R	R/C	R	R/S	R/C	R/C																												
29. Devel. & C.P.M. Act.	C	R	R/C	I	R	R	R/S																													
30. Psychosocial Act.	C	R	R/C	R	R	R/S																														
31. Motor & A.D.L. Act.	C	R	R/C	R	R/S																															
32. Device Construction	C	R/S	R	I																																
33. General Activities	C	R	R																																	
34. Reporting Tx.	C	I																																		
35. Materials Maintenance	C																																			
36. Self Education																																				

vis-a-vis the learner's knowledge and aptitudes, and within the context of the institutional setting.

Again, the chart on page 14 may give some assistance.

Modules are listed on each axis in a linear learning sequence. They are grouped according to the content areas and in increasing complexity of learning. However, learning is rarely linear. For example, module #7 "Disabling Conditions" may not require #2 "The Occupational Therapy Aide" as a prerequisite, but it may require #6 "The Human Body". All three of those modules may be prerequisite to #24 "Self-Care Activities and Devices".

The use of the charts to determine suggested, related, and simultaneous learnings should provide direction for designing alternative course sequences for a variety of learners in several different settings. One potential sequencing pattern for the modules contained in this guide is presented on page 16 .

3. Assembly of course work. As a course is assembled, the following processes should take place:

    a. Clarify and specify instructional objectives.
    b. Estimate the amount of time (number of hours, number of credits, etc.) the course should require.
    c. Determine teaching strategies and methods.
    d. Determine teaching media, bibliographical resources, or texts.
    e. Determine evaluation instrument (classroom or laboratory test) to be used.

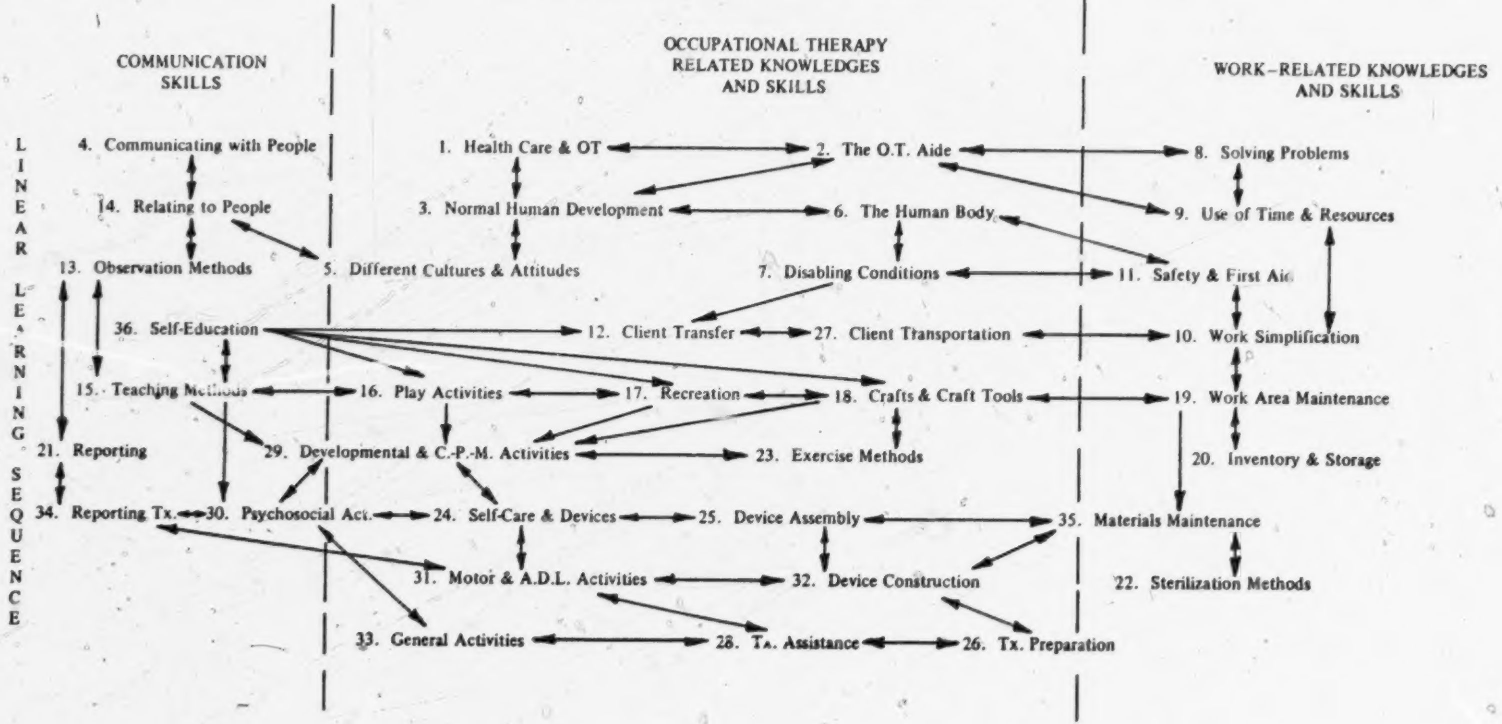
    Example: Assume that the following two modules are to be combined into a course of instruction:

    Basic Information Module: Communicating with People: Methods of verbal and non-verbal processes.

    Information-Application Module: Relating to People: Opportunities for developing awareness of and skill in interpersonal relationships.

    a. Clarify and Specify Instructional Objectives: Following are the overall performance objectives:

SUGGESTED LEARNING SEQUENCE
PREPARATION FOR OCCUPATIONAL THERAPY AIDE


COMMUNICATION SKILLS
OCCUPATIONAL THERAPY RELATED KNOWLEDGES AND SKILLS
WORK–RELATED KNOWLEDGES AND SKILLS
LINEAR LEARNING SEQUENCE
4. Communicating with People
14. Relating to People
13. Observation Methods
36. Self-Education
15. Teaching Methods
21. Reporting
34. Reporting Tx.
1. Health Care & OT
2. The O.T. Aide
3. Normal Human Development
6. The Human Body
5. Different Cultures & Attitudes
7. Disabling Conditions
12. Client Transfer
27. Client Transportation
16. Play Activities
17. Recreation
18. Crafts & Craft Tools
29. Developmental & C.-P.-M. Activities
23. Exercise Methods
30. Psychosocial Act.
24. Self-Care & Devices
25. Device Assembly
31. Motor & A.D.L. Activities
32. Device Construction
33. General Activities
28. Tx. Assistance
26. Tx. Preparation
8. Solving Problems
9. Use of Time & Resources
11. Safety & First Aid
10. Work Simplification
19. Work Area Maintenance
20. Inventory & Storage
35. Materials Maintenance
22. Sterilization Methods

Communicating With People: To identify selected ways individuals communicate with each other.

Relating to People: 1) To identify the effect of the learner's behavior and attitudes upon other individuals, 2) to recognize constructive methods of responding to a variety of attitudes and behaviors, and 3) to develop an acceptable skill in responding to other individuals in constructive and appropriate ways.

If it is determined that all of the above objectives are an essential part of the course, then each objective should be clarified to specify:

1) who should do the activity (audience),
2) what should be done (behavior),
3) under what circumstances (conditions), and
4) how well or completely (degree)?

For example, for the "Relating to People" module above, objective #2 could be restated to read:

> Given a situation to observe in which two people are attempting to come to a mutual decision (conditions), the learner (audience) will observe and report (behavior) at least five instances of helpful or constructive behavior and at least five instances of non-helpful or destructive behavior (degree).

Determination of precise behavioral objectives is a difficult task. Some assistance may be found by selecting behaviors from the suggested objectives in each module.

Some educators feel that precise behavioral objectives are limiting to the learner. At any rate, both teacher and learner should know what the learning goals are in any given course.

Clarification of objectives will also point out the need for related learnings. In the above example the learner will need either prior or simultaneous learning in observation methods.

To provide both a guide for writing behavioral objectives and the context in which the suggested objectives in each module were written, a list of verbs adapted from the Taxonomy of Educational Objectives, Handbook I: The Cognitive Domain, edited by Benjamin Bloom, is presented on page 19.

b. Estimate the amount of time the course will require. At this point some estimation of how much time is involved for the "average" learner must be made in order to make related decisions concerning scheduling and sequencing.

c. Determine teaching strategies and methods. Assistance in this task may be found in Appendix A of this manual. For the above example, a student group activity, using discussion and/or task groups to determine what is meant by helpful and non-helpful behavior and student independent strategy for observation, reading, and reporting might be useful.

d. Determine teaching media and resources. Assistance in this task may be found in Appendix C of this manual. The listing is by no means complete. For the example above, video tapes or films of dyadic interrelationships might be useful. The guide user can find additional information about the subject area for his own preparation or decide that the resources are appropriate for student use to gather relevant information.

e. Determine evaluation instrument. Assistance in this task may be found in Appendix B of this manual. In the above examples, the evaluation of learning competence would depend upon whether or not the learner reported (either orally or written) the required 10 items. Accuracy (whether the behavior really is helpful or non-helpful) is not required in the above example, nor is a standard of accuracy stated.

No discussion of instructional objectives would be complete without consideration of affective objectives or applications. Integration of feeling with knowledge and skill is essential to satisfactory performance.

A CLASSIFICATION OF VERBS RELATED TO A COGNITIVE TAXONOMY

Knowledge - emphasis on recall, specific or universals.
VERBS:

choose
define
identify
review
survey
read
indicate
answer question
label
list
locate
match
select
copy
complete a word, phrase, or statement
record
confer (to gain information)
review (to obtain facts)

Comprehension - emphasis on grasp of meaning, intent, relationships, in oral, written, graphic, non-verbal communication.
VERBS:

classify
describe
estimate
expand
explain
express
interpret
measure
recognize
suggest
summarize
trace
convert
compare the importance of
put in order
compute
review to explain

Application - emphasis on applying appropriate principles or generalizations.
VERBS:

arrange
apply
calculate
construct
make
draw
demonstrate
differentiate
discuss
implement
coordinate (activities)
use information, tools
collect information
keep records
perform activity
plan activity
prepare
present
solve
compile data
schedule
administer test

Analysis - emphasis on breakdown into constitutent parts and of the way they are organized.
VERBS:

analyze
debate
determine
differentiate
review to analyze
form generalizations
deduce
draw conclusions
make inferences
organize
interpret relationships

Synthesis - emphasis is on putting elements or parts to form a whole.
VERBS:

combine and organize
design
develop
coordinate (program design)
produce
write (original)
plan program

Evaluation - emphasis is on values, making qualitative or quantitative judgments with criteria from internal or external sources and with standards.
VERBS:

make a decision
evaluate
compare (and contrast)

4. Affective Applications to Learning Occupational Therapy Aide Skills. The following affective objectives are related to task performance of the occupational therapy aide in a clinical application setting, but it is assumed that the listed affects will be learned throughout the learner's educational program. As the educator plans curriculum he should attempt to integrate affective learning with cognitive and psychomotor learning. Therefore, although the following objectives relate to clinical application, related affective objectives must also be included during the learning of basic information and information-application modules. Their placement and composition depends upon learning sequence, module clustering, and the value system of each individual learner.

The affective applications are structured as follows:

1. *Title and definition of affective application. Both of these items are extrapolated from:* Krathwohl, David R.; Bloom, Benjamin S.; and Masia, Bertram B. Taxonomy of Educational Objectives, Handbook II: The Affective Domain, New York: David McKay Company, 1964.
2. *Overall Performance Objective: This item is an explanation of how the affect is related to occupational therapy task performance.*
3. *Suggested Questions Concerning Learner Performance: These items are stated as questions to suggest means by which the teacher and the learner may infer satisfactory task performance. They are not definitive. Many alternative questions are possible.*

Following are a list of affective performance objectives, extrapolated from a questionnaire sent to occupational therapy educators and practitioners.

Affective Applications for the Occupational Therapy Aide

a. Affective Application: Awareness: "Sensitization to the existence of certain phenomena and stimuli; that is, that a learner be willing to receive or attend to them".

Overall Performance Objective: The learner will demonstrate an awareness of behaviors and events in:

escorting client to and from training area;
assisting client during specified therapeutic play or learning activities;
assisting client in specified group or individual activities to develop client's psychosocial skills;
assisting client in specified therapeutic motor activities to develop client's physical skills;
recording attendance, verbally reporting client activity, behavior, and skills, and conferring with supervisor and treatment team.

Suggested questions concerning learner performance:

1. How does the learner appear to pay attention and describe what he sees?
2. How does the learner attend to multiple stimuli?
3. How does the learner express willingness to observe carefully the behavior or motor activity of clients?
4. How does the learner express interest in the client when he talks with him?
5. How does the learner express interest in the duties, tasks, and skills of his co-workers?
6. How does the learner appear to notice moods of others?
7. How does the learner observe the client's comfort and safety during transportation activities?

b. Affective Application: Willingness to Receive: "the behavior of being willing to tolerate a given stimulus (and not to avoid it) involving a neutrality or suspended judgment toward the stimulus".

Overall Performance Objective: The learner will display an acceptance of client values and behaviors in:

assisting client in specified group or individual activities to develop client's psychosocial skills.

Suggested questions concerning learner performance:

1. In what way does the learner demonstrate a tolerance for a variety of types of people?
2. Does the learner demonstrate a tolerance of cultural patterns by individuals in other groups - religious, social, political, economic, national, etc.?
3. Does the learner avoid making value judgments concerning the client's personal ethical, moral, or religious value system?
4. How does the learner separate his personal feelings concerning client behavior from objective reporting of behavior?
5. How does the learner maintain neutrality of affect when confronted with hostile or acting out behavior?

c. Affective Application: Willingness to Receive: behavior which "involves a neutrality or suspended judgment toward a stimulus and where attention of a phenomenon occurs".

Overall Performance Objective: The learner will display a sensitivity to client values and behaviors in:

escorting client to and from treatment or training area;
assisting client in specified group of individual activities to develop client's psychosocial skills;
implementing general recreational and arts and crafts activities in facilities such as nursing homes, homes for crippled children, etc.

Suggested questions concerning learner performance:

1. What overt behavior does a learner display to indicate his sensitivity to human needs?
2. How does the learner demonstrate awareness and inclusion of client values in making suggestions concerning client activities?

3. How does the learner justify his suggestions and actions on the basis of client needs?
4. How does the learner express a desire to adjust his method of communication and teaching to the level of client comprehension?

d. Affective Application: Acquiescence in Responding: "the reaction to a suggestion without resistance or yielding unwillingly".

Overall Performance Objective: The learner will demonstrate a compliance in performing tasks in:

preparing for treatment or training by reading schedule, by arranging daily work plan, by conferring with staff, by gathering material, by constructing needed items, and by rearranging furniture and equipment;
escorting client to and from treatment or training area;
treating or training client according to specific instructions to assist in treatment program;
recording attendance, verbally reporting client behavior, skills, and activity, receiving instruction during meetings with supervisor and treatment team;
fabricating, modifying, or adapting slings, splints, and self-help devices as directed;
maintaining occupational therapy work areas by cleaning, transporting, storing, and visually inspecting materials, equipment, and supplies.

Suggested Questions concerning learner performance:
1. How does the learner demonstrate willingness to approach a task for which he has been given directions or orders?
2. How does the learner defend rationally and without undue emotion non-performance of or unwillingness to perform assigned tasks?
3. How does the learner assume responsibility for organizing his own tasks without dependence on others for detailed instructions or directions?
4. Does the learner display enthusiasm or indifference at being asked to prepare the treatment area? Record attendance?

5. How does the learner demonstrate compliance in performing a task he does not like to do?

e. Affective Application: Willingness to Respond: "the capacity for voluntary action not so much in response to outside prompting as it is a voluntary response from choice".

Overall Performance Objective: The learner will display a willingness to provide service in:

escorting client to and from treatment or training area;
assisting in treatment and training client according to specific instructions.

Suggested Questions concerning learner performance:

1. Does the learner assume a responsibility for escorting patients and assisting in treatment without prompting?
2. Does the learner volunteer for extra tasks or offer to assist clients when he has time?
3. How does the learner demonstrate a willingness to perform obviously needed tasks without specific direction?
4. How does the learner demonstrate his willingness to help clients? Does he see to their physical comfort? Does he listen attentively?

f. Affective Application: Satisfaction in Response: "behavior accompanied by a feeling of satisfaction, an emotional response, generally of pleasure, zest, or enjoyment".

Overall Performance Objective: The learner will derive a feeling of satisfaction in:

escorting client to and from treatment or training area;
implementing general recreational and arts and crafts activities in facilities such as nursing homes, general and psychiatric hospitals, etc;
maintaining occupational therapy work areas by cleaning, transporting, storing, and visually inspecting materials, equipment, and supplies.

Suggested questions concerning learner performance:

1. Does the learner discuss his job with others in a positive fashion?
2. How does the learner demonstrate pleasure when another individual compliments his work?
3. How does the learner demonstrate interest or pleasure in helping clients during transport and transfer?
4. How does the learner give evidence of enthusiasm during recreational or party activities?
5. How does the learner show pride in maintaining a clean, tidy, and safe work area?
6. How does the learner demonstrate zest for his work activities?

g. Affective Application: Acceptance of a Value: "the emotional acceptance of a proposition or doctrine upon what one implicitely considers adequate ground".

Overall Performance Objective: The learner will display an acceptance of the values of providing services in:

assisting in treating or training client according to specific instructions;
assisting client in specified therapeutic motor activities;
implementing general recreational and arts and crafts activities in facilities such as homes for crippled children, psychiatric hospitals, etc.;
recording attendance, verbally reporting client activity, behavior, and skills; receiving instruction during meetings with supervisor and treatment team;
maintaining occupational therapy work areas by cleaning, transporting, storing, and visually inspecting materials, equipment, and supplies;
receiving continuing education by participating in programs to upgrade job knowledge and keep abreast of developments in the field.

Suggested questions concerning learner performance:

1. Does the learner assume a responsibility for assisting clients as directed?
2. Does the learner display enthusiasm or indifference at being asked to provide service to clients?
3. Does the learner volunteer to assist in special events for clients?
4. How does the learner demonstrate his willingness to spend time and effort in keeping the work area neat, clean, and safe?
5. How does the learner demonstrate interest in discussing or learning about occupational therapy services?
6. How does the learner seek out information related to his job skills and knowledge?
7. Do clients feel that the learner is willing to listen and help?
8. Do staff members feel that the learner is willing to assist them?
9. How does the learner demonstrate willingness to maintain records and report activities as requested?

h. Affective Application: Commitment: "The Conviction of a belief held beyond a shadow of a doubt and the act of furthering the thing valued in some way, to extend the possibility of developing it, to deepen involvement with it and things representing it".

Overall Performance Objective: The learner will develop a commitment of the values of therapeutic activities by:

implementing general recreational and arts and crafts activities in facilities such as nursing homes, hospitals, etc.

Suggested questions concerning learner performance:

1. How does the learner demonstrate his desire to help clients derive satisfaction in their activities?
2. How does the learner demonstrate his concern for the success of the activities program?

3. Does the learner appear to be committed to helping clients complete their projects?
4. How does the learner express concern for the welfare and happiness of his clients?

i. Affective Application: Conceptualization of a Value: "the comparative evaluation of values after it has been demonstrated that a particular value has emerged".

Overall Performance Objective: The learner will form judgments concerning personal responsibility by:

receiving instruction and continuing education in programs to update job knowledge and keep abreast of developments in the field.

Suggested questions concerning learner performance:

1. In what way does the learner demonstrate evidence of evaluating his learning needs?
2. How does the learner determine priorities of personal learning requirements?
3. How does the learner demonstrate his personal judgments concerning his responsibility in self-education programs in relation to his other tasks and duties?

j. Affective Application: Organization of a Value System: "development of a value system to bring together a complex of values, possibly disparate values, and to bring these into an ordered relationship to one another".

Overall Performance Objective: The learner will organize a value system concerning personal responsibilities in:

receiving instruction and continuing education in programs to upgrade job knowledge and keep abreast of developments in the field.

Suggested questions concerning learner performance:

1. How does the learner organize his value system concerning his personal responsibilities in seeking, finding, and using resources to maintain and improve personal knowledge and skill?

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

BASIC INFORMATION MODULE

I. What is Health Care: What is Occupational Therapy?: An overview of where and how health care services are available and the roles and functions of health care professions, with emphasis on occupational therapy.

Overall Performance Objective: 1) To identify and discuss the total system of health care including the professional groups who provide health care, the poeple who need health care, the kinds of agencies which provide health care, and worker levels and titles in health care and 2) to identify the functions and services provided by occupational therapy and worker levels in occupational therapy.

Related Activities In Occupational Therapy: To comprehend the overall health care picture; understand where occupational therapy fits in the overall system;and understand where the learner fits into occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "health care" and identify by name the types of health care available in health facilities around the local area.	Health care are services to prevent or cure ill health, disease, or disability. Types: A. Acute/restorative B. Preventive C. Maintenance A. Acute/restorative: hospitals rehabilitation centers B. Preventive: community mental health planned parenthood public health innoculations research in federal food and drug administration C. Maintenance: rest homes
2. List and describe in his own words the more common health care professions.	Physicians, Nursing, Dietetics, Physical Therapy, Social Work, etc.

3. State some of the services that each of the above provide for clients.	Physicians: public education about health, health care planning, diagnosis, medical treatment, etc. Social workers: seeking out community resources, counseling, working with socio-economically disadvantaged, etc.
4. Identify and list common health care needs.	Overall medical care, rehabilitation, mental health care, innoculations, dentistry, family planning, convalescent care, emergency care, etc.
5. Identify health care facilities within a given community.	Community health clinics, hospitals, mental health hospitals, mental retardation centers, sheltered workshops, etc.
6. Identify worker levels in health care facilities by level of training and responsibility and classify them according to the level of education needed to perform in that position.	Professional: physicians, therapists, social workers, registered nurses, etc. Technical: physicians, assistants, allied health technician, practical nurses, etc. Junior College: vocational or technical training: to implement or carry-through decisions. Aide or assistant: nurse aide, therapy aide: vocational training to assist in implementing plans.
7. Identify and explain in his own words services provided by occupational therapy.	Evaluation of level of function in psychosocial and physical cases. Using activities to restore physical function. Using activities to restore psychosocial function. Using activities to assist vocational readiness. Using activities to help clients mature, etc.
8. Identify the kinds of health care facilities in which occupational therapy works.	Hospitals, mental health centers, rehabilitation centers, home health care, sheltered workshops, etc.

9. Identify the worker levels in occupational therapy and their job responsibility.

Therapist: makes treatment plans.
Technician: implements treatment.
Aide: assists in treatment.

Suggested Teaching Strategies:
- Student Independent, p. A-8
- Teacher-Student Group, p. A-6
- Student-Student Group, p. A-7

Suggested Evaluation:
- Matching, p. B-9
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- S: 12, p C-16
- F: 42, p. C-36; 45, p. C-37; 107, p. C-49; 112, p. C-50
- References, p. C-61

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

BASIC INFORMATION MODULE

2. The Occupational Therapy Aide: Identification of specific learning requirements related to becoming an occupational therapy aide and active participation in selecting learning experiences.

Overall Performance Objective: 1) To review the occupational therapy aide job description and identify specific job requirements, 2) to explore personal feelings about learning to become an occupational therapy aide and diccuss these with an instructor and group of other students, 3) to review the curriculum guide, identify specific learning requirements, and explore personal feelings about his competency and discuss these with his instructor, and 4) to participate in the planning and selection of his own learning experiences, with the opportunity to select modules in which he feels competent and demonstrate proficiency in performing the required tasks.

Related Activities in Occupational Therapy: To comprehend the learning experiences and requirements for the occupational therapy aide.

Suggested Objectives: Examples:

The Learner Should:

1. Read and discuss an occupational therapy job description.
2. Identify and discuss specific job requirements.
3. Prepare a list of questions to clarify unclear statements.
4. Explore personal feelings about learning to be an aide.
5. Express his feelings concerning readiness (or lack or readiness) to learn.
6. Discuss the learning program planned for him.
7. Identify specific learning and performance requirements.
8. Explore his personal feelings about his ability to meet learning objectives.

9. Decide whether or not to continue the learning process.

10. Explore feelings about personal competency in performing any or all of his learning assignments.

11. Select the parts of the learning program in which he feels competent in the stated performances and knowledges.

12. Demonstrate competency by performing selected tasks.

13. Demonstrate comprehension of factual knowledge.

Suggested Teaching Strategies:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
True-False, p. B-8
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-61

3. Normal Human Development: Overview of life stages and tasks of the human life cycle.

Overall Performance Objective: To identify 1) major developmental stages and life tasks of each human life stage and 2) human activities appropriate to each.

Related Activities in Occupational Therapy: To relate appropriately with client; observe and report client behavior; and perceive and comprehend his own behavior.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define and list each human life stage.	Infancy, childhood, adolescence, adulthood, etc.
2. List and describe all major life tasks.	Independent self-care, going to school, dating, marriage, child rearing, retirement, death, etc.
3. State during what human life stage the above occur and briefly describe each life task.	Independent self-care should take place in childhood. It includes: self-feeding, dressing, bowel and bladder control, etc.
4. Identify activities which are normally associated with each life stage and are the normal means of learning life tasks.	Infancy: being cuddled - learning to love and relate, playing with hands and feet, learning about self, etc. Childhood: toilet training, learning independent self care, playing, learning basic skills which later lead to learning work, and developing avocational interests.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11

Suggested Resources:

F: 6, p. C-28; 33 & 34, p. C-34; 50, p. C-38; 59 & 60, p. C-40; 84; p. C-50; 110, p. C-50; 120, p. C-52

References, p. C-61

4. Communicating with People: Methods of verbal and non-verbal processes.

Overall Performance Objective: To identify selected ways individuals communicate with each other.

Related Activities in Occupational Therapy: To exchange information; receive instruction; establish rapport with client and staff; assist planners and implementors of client treatment; and instruct and assist client in treatment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define terms related to verbal communication.	Terms: communication, meaningfulness, clarity, feedback, message, etc.
2. Explain the relationship of the above terms to the concept of presenting information.	
3. Identify, list and describe signs of non-verbal communication.	Body movement, facial expression, voice intonation, body posture, etc.
4. Explain how these signs give clues as to how a listener is receiving information or how a speaker is sending information.	Blank expression may mean boredon or lack of understanding. Constant movement may mean restlessness. If sender sits forward, it may show enthusiasm or attack.
5. Explore and report personal feelings concerning giving and receiving directions.	Receiving: general versus specific directions; curt directions, etc. Giving: telling another individual to do something, demanding that he do it, requesting, etc.
6. Explore personal behavior in relation to communicating with both an individual and a group.	How does he see himself? How do others see him relating to people?
7. Describe how feelings or behavioral responses of others are affected by his verbal and non-verbal communication.	

8. Identify various techniques of encouraging individuals to alter their responses and demonstrate an acceptable skill in each technique.	Persuasion, encouragement, praise, regard, setting limits, suggesting alternate behaviors.
9. Define terms related to group leadership and basic group roles.	Leader, follower, disrupter, disinterested person.
10. Explain how these terms relate to small group interaction.	Two people competing for leadership. No one willing to assume leadership, effects of a disrupter on others, effects of a disinterested person on the outcome of the group task.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
True-False, p. B-8
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

F: 24, p. C-32; 63, p. C-42
References, p. C-61

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

BASIC INFORMATION MODULE

5. Different Cultures and Attitudes: Overview of variations of life style and economic and cultural background among the population of American society.

Overall Performance Objective: 1) To identify socio-economic groups and ethnic life styles and 2) to discuss the effect of cultural bias on behavior.

Related Activities in Occupational Therapy: To relate appropriately with clients; observe and report client behavior; and perceive and comprehend his own behavior.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the terms "culture", "ethnic group", and "socio-economic" status in his own words.	
2. Identify major classifications of socio-economic groups.	Lower, middle, and upper class.
3. Describe group factors as they relate to each classification.	Factors: relative income, general educational level, occupational group, etc.
4. List major religious and ethnic groups by name.	Religious groups: Protestant, Roman Catholic, Jewish, etc. Ethnic Groups: Irish, Italian, German, Black, Mexican, Indian, etc.
5. Define and explain the term "cultural bias".	Cultural bias is an inclination or tendency to accept the prejudices or beliefs of a given cultural or ethnic group.
6. Identify characteristics, cultural biases, or beliefs held by individuals associated with various groups and discuss his perceptions of the relative accuracy of these beliefs as related to individuals in other groups.	White Anglo-Saxon Protestant: hard-working, frequently bigoted, competetive, etc. Black: increasing resentment of white pressure, etc.

7. Identify and describe economic, political, geographic, and social conflicts which are prevalent in contemporary American society which may be reflected in staff and client relationships in health care facilities.

Conflicts: Southern poor white vs. Southern black; middle class urban white vs. ghetto black, etc.

8. Identify and discuss his own cultural biases and explore and discuss the effect his cultural bias has on other individuals and the affect of the cultural bias of others on his own behavior.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
G&S: 1, 2 & 3, p. C-7
F: 13 & 17, p. C-30; 28, p. C-33; 44, p. C-37; 57, p. C-39, 75, p. C-43; 77, p. C-44; 101, p. C-48

6. The Human Body: Basic structure, function, motion, and positions of the body.

Overall Performance Objective: 1) To identify and describe basic body functions and 2) to recognize and imitate body movements and body position.

Related Activities in Occupational Therapy: To identify and report client's physical behavior; assist physically disabled clients in their activities; and perform tasks safely.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify, list and describe the basic body functions.	Digestion, excretion, movement, perception, thinking, etc.
2. Describe briefly how each body function is accomplished in the human body and which body systems are involved.	Digestion is accomplished by the digestive system which includes the stomach, intestines and certain glands. Movement is accomplished by muscles which are stimulated by nerves, etc.
3. Describe and imitate all basic motions of foot, knee, hip, torso, head, shoulder, elbow and wrist.	Ankle: bend straighten, turn in, turn out. Hip: bend straighten, turn in, turn out, rotate. Spine: bend to side, back, forward, etc.
4. Identify and list common terminology for basic grasp and finger motions.	Fist, pinch, hook, suitcase, etc.
5. List all body positions at rest, state where pressure points are in each position, and state where bedsores may form.	On back, on stomach, on side, sitting, leaning, etc. Pressure points: on back, buttocks, shoulder blades, on stomach, front hip, bones, knees, elbows, etc.
6. Identify qualities of motion.	Smooth, tremorous, jerky, quick, slow, etc.

7. Identify motions, which are considered immature in the normal adult.	Termor, jerkiness, etc.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 51, p. C-39; 64, p. C-42
References, p. C-62

7. Disabling Conditions: Physical conditions which impair the normal growth, development, and life style of people.

Overall Performance Objective: 1) To identify major disabling conditions commonly seen in occupational therapy which limit or alter either physical or psychosocial function or behavior, 2) to report how each condition limits or alters function, behavior, or attitudes, 3) to state what safety precautions and communication techniques are necessary, and 4) to list some attitudes the learner might expect from persons who have disability conditions.

Related Activities in Occupational Therapy: To assist in client treatment; observe and report client's activities; and relate with client.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify neurologic conditions.	Altered or damaged perception: blindness, deafness, loss of balance, feeling, etc.
2. State how the above conditions alter normal function and behavior.	Motor Dysfunction: paralysis of all kinds, incoordination, Cognitive dysfunction: mental retardation, etc.
3. State necessary techniques of communicating with such clients.	Deaf - use hand signals, writing.
4. State safety precautions indicated for each disability.	Not permitting desensitized surfaces to contact heat, notifying blind individuals of obstructions, walking close to incoordinated individuals, etc.
5. State attitudes the client might expect.	Deafness: suspicious of what people are saying, etc.
6. List acute medical conditions commonly seen in occupational therapy.	Burns, heart problems, kidney problems, infectious diseases (such as hepatitis), etc.
7. State how acute illnesses alter normal behavior, attitudes, and function.	Client may be fearful, weak, tire easily, anxious, etc.

8. State what safety factors are involved in working with acute medical problems.	Avoiding tiring the client, avoiding, strong smells, keeping the bedding clean, etc.
9. Identify bone and joint conditions.	Stiff joints, body members in traction or casts, etc.
10. Describe safety precautions needed for each of the above conditions.	Not letting stiff joints get cold, not touching traction weights, not getting foreign matter under casts, etc.
11. List the safety factors necessary in pre- and post-surgical conditions.	Checking with nurse for precautions, watching for signs of fatigue, avoiding infection, etc.
12. Describe attitudes common to surgical patients.	Anxious about surgery, finances, etc.
13. Describe behaviors exhibited in basic psychiatric symptoms commonly seen in an occupational therapy setting.	Hallucinations, compulsive behavior, acting-out behavior, etc.
14. Discuss methods of relating to individuals with various symptoms.	Matter of factness with depressed patients, diverting attention of hostile clients, etc.
15. Describe attitudes and problems of clients with terminal illnesses.	Denial, bargaining, depression, acceptance, etc.
16. State ways of relating to clients.	Attentive listening, accepting feelings, etc.

Suggested Teaching Strategy:

Direct Communication, p. A-5
Teacher-Student Group, p. A-6

Suggested Evaluation:

List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

References, p. C-62

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

8. Solving Problems: An overview of problem-solving methods used in learning new material and skills and in following specific and general directions.

Overall Performance Objective: 1) To discuss and identify how problems are solved in daily life, 2) to identify how each learner solves problems, and 3) to develop skill in applying problem solving methods to seeking and finding resources for learning and following general and specific directions.

Related Activities in Occupational Therapy: To determine and follow procedures for conferring with and receiving instructions from staff; preparing daily work schedule; preparing materials and devices for treatment; transporting and positioning clients; explaining and demonstrating activities to clients; adapting communication to client's disability, personality, and background; encouraging client participation; and participating in activities involving continuing education.

Suggested Objectives:	Examples:
The Learner Should:	
1. Discuss how problems are solved in every day activities and identify how they go about solving everyday problems.	Statement of problem, determination of alternate solutions, choice of solutions, performance of solution, evaluation of performance, etc.
2. Given specific directions to complete an activity, analyze the directions.	Directions: 1. List examples of health care from a test or lecture. 2. Follow written craft kit directions. 3. Thread and run a projector.
3. Relate problem solving procedures to following specific directions.	
4. Given general directions to complete an activity, analyze the directions.	Directions: Explain in his own words what kinds of services are provided by occupational therapy.
5. Apply appropriate problem-solving procedures to following general directions.	Directions: arrange furniture in a room for group discussion.

6. After following general and specific directions, compare and contrast relative difficulty of the two.	Specific instructions do not leave as much room for making mistakes, but don't allow freedon of choice for the "how to's". General directions allow freedom from choosing how to do it, but skill is required in determining the "how to's".
7. Identify situations in which general directions are enough for him and situations where specific instructions are needed.	Things in which he has little previous experience may require more specific directions.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
True-False, p. B-8
Multiple Choice, p. B-9
Completion, p. B-10
List, p. B-11
Observation Techniques, p. B-12

9. Use of Time and Resources: Efficient utilization of available time and resources.

Overall Performance Objective: To identify and demonstrate procedures for planning daily work schedules and for locating and using available instructions, materials, and equipment.

Related Activities In Occupational Therapy: To complete assigned activities, such as preparing for treatment or training; constructing materials or devices; assisting in treatment or training activities; maintaining proper sterilization and aseptic techniques; and improving personal skills and knowledges.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a sample treatment schedule and a number of assigned activities, identify and explain procedures for his scheduling his own time.	Determine preparation time, time for working with clients, etc.
2. Plan a daily schedule for his activity by applying appropriate problem solving procedures.	
3. Given a list of alternative personal resources for obtaining assistance, define the role of each position.	Supervisor, staff therapist, other allied health professionals, aides, etc.
4. Explain what kind of information and assistance the above personnel can give to him.	
5. Given a list of alternative resources for obtaining supplies, describe each resource in terms of its usefullness for assigned activities.	Resources: catalogs, laboratory area, storage area lists, etc. Activities: preparing for treatment or training, adapting an assistive device to meet specifications, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:

- Matching, p. B-9
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:

- F: 73, p. C-43

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

10. Work Simplification Techniques: Use of problem solving and body mechanics for efficient and safe performance of an activity.

Overall Performance Objective: 1) To identify and apply work simplification techniques to his own activities and 2) to explain and demonstrate activities of daily living or housekeeping.

Related Activities in Occupational Therapy: To ready treatment area and materials for client, as directed; assist client to and from treatment area; and assist client during his activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify work simplification methods commonly used in occupational therapy.	Problem solving applied to planning an activity, gathering materials together, etc. Body mechanics applied to bending and stooping efficiently, pushing and pulling with body weight, correct posture, etc.
2. Describe how work simplification methods can be used in his own work activities.	Recognize and imitate good body movement, body mechanics, and positions, think through an activity before doing it, etc.
3. Apply work simplication techniques to daily work activities.	Planning steps, using proper body mechanics, etc.
4. Use work simplifications techniques and techniques of giving directions to instruct another individual in a housekeeping activity.	Cleaning a table, putting a cabinet in order, arranging furniture, cooking a meal, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 51, p. C-39; 87, p. C-45

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

11. Safety and First Aid: Methods and procedures which reflect commonly accepted principles of personal and client protection.

Overall Performance Objective: To identify and apply safety procedures to client treatment situations and his own activities.

Related Activities in Occupational Therapy: To maintain client and personal physical status and to arrange and use material and equipment safely.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify potential hazards inherent in materials and equipment commonly used in occupational therapy.	Fire hazards, sharp edges, hot surfaces, etc.
2. State how materials may be safely used.	
3. Practice using materials and equipment in a safe manner.	
4. Recognize safe storage and placement for hazardous material and equipment.	Storage of combustables in metal containers, placement of power tools with switch in "power off" position, placement of materials in cabinets in such a way that they do not fall, labeling all material containers and storage cabinets, placement of appropriate warning signals, etc.
5. Demonstrate comprehension of safety procedures in a given situation.	
6. Identify and explain methods of lifting, transporting, and carrying heavy or large items according to commonly accepted definitions of safety.	

7. List appropriate body movements used for lifting and placing items without personal injury.	
8. Identify and explain methods of lifting and handling clients according to commonly accepted definitions of safety.	
9. Relate these methods to a given disabling condition.	
10. State how to change client's position, rearrange client's clothing, and place extremities for safe transportation, escort, and treatment.	
11. Identify physical and emotional signs of client which might give cues to the start of an emergency situation.	Loss of color in lips and nail beds, perspiration, dilated eyes, shallow, eneven breathing, combativeness, etc.
12. Recognize when a situation in an occupational therapy setting becomes an emergency and identify and describe procedural steps usually required to meet the emergency.	Situation: fire, cut (from broken skin to arterial bleeding), respiratory distress, cardiac distress, seizures, fainting, falling, an attacking client. Procedures: know before emergency where help is, how to evacuate area and put out small fires, how to use the compression bandages, know resuscitation and seizure procedures, etc.
13. Demonstrate an acceptable skill in performing minor emergency procedures as required.	

Suggested Teaching Strategy:
Direct Communication, p. A-5
Teacher-Student Group, p. A-6

Suggested Evaluation:

Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

FS: 4 & 5, p. C-23; 5, 6 & 7, p. C-24
References, p. C-63

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

12. Transferring and Lifting Clients: Assisting clients to change position or move from one place to another.

Overall Performance Objective: To identify, describe, and apply methods of safe lifting and supporting a client during transfer.

Related Activities In Occupational Therapy: To assist client to and from treatment or training area and assist client in transfer to and from bed, wheelchair, stand-in-table, etc.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe body mechanics which are used to safely lift and support clients.	Moving clients over center of body, stooping from the knee, pulling with body weight, etc.
2. Identify and describe types of functions of transportation equipment.	Wheelchairs, gurney carts, orthopedic carts, Stryker Frame, etc.
3. Recognize given component parts and functions of transportation equipment.	Back rests, brakes, arm rests, belts, aid guards, foot pedals, etc.
4. Identify potential hazards of each vehicle.	Client sliding of falling from vehicle, vehicle tipping or running into other objects, etc.
5. Given an individual exhibiting a specific disability and a specific vehicle, assist the individual in or onto the vehicle by applying information previously learned.	From high bed to wheelchair, wheelchair to stand-in-table, etc.
6. List specific areas in a health establishment or home in which barriers to transportation may appear.	Doorways, inclined planes, stairs, curbs, elevators, etc.
7. Identify specific methods and procedures in overcoming barriers commonly encountered.	Turning wheelchair around and backing onto or through a curb or doorway, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
S: 1-11, p. C-16
VT: 21, p. C-22
FS: 1 & 2, p. C-23
FL: 2, p. C-26
References, p. C-63

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

13. Observation Methods: Methods of seeing and perceiving physical and psychosocial behaviors.

Overall Performance Objective: 1) To identify the differences between structured and informal observation and 2) to develop an acceptable skill in recognizing behaviors and physical conditions that are important in an occupational therapy setting.

Related Activities in Occupational Therapy: To oversee client activity; assist client during specified activity; and report what he sees to supervisor or staff.

Suggested Objectives:	Examples:
The Learner Should:	
1. Classify observational methods in terms of whether they are structured or informal observation.	Structured: using behavior check lists or ADL forms, etc. Informal: watching client performance, listening to client, etc.
2. Recognize and describe a number of individual behaviors and physical conditions as conditions to look for in applying informal observational methods to interact with clients and to report what is seen.	Individual behaviors: restlessness, irritability, inattentiveness, short attention span, acting out, etc. Physical conditions: red pressure spots under a splint of sling, sleepiness, palor, fast or shallow breathing, etc.
3. Recognize and describe a number of social behaviors as conditions to look for in applying informal observational methods in group or client social situations and also to report what is seen.	Social behavior: group leader, group follower, withdrawn, friendly, etc.
4. Given a list of behaviors and a specified situation, accurately identify behaviors which are seen by checking them off on the list.	

5. Given a situation in which the learner and another individual are in one to one relationship, report what he observed concerning the individual's feelings and state of well-being.

6. Given a situation in which the learner and another individuals are in a small group situation, report what he observed concerning group interactions.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
True-False, p. B-8
Matching, p. B-9
Observational Techniques, p. B-12

14. Relating to People: Opportunities for developing awareness of and skill in interpersonal relationships.

Overall Performance Objective: 1) To identify the effect of the learner's behavior and attitudes upon other individuals, 2) to recognize constructive methods of responding to a variety of attitudes and behaviors, and 3) to develop an acceptable skill in responding to other individuals in constructive and appropriate ways.

Related Activities in Occupational Therapy: To relate appropriately and constructively with authorities, peer groups, and clients.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a list of roles played by various people in various human relationships, explain or describe his perceptions of the behaviors people exhibit in these roles.	Mother figure, authority figure, peer, sibling, child, parent, adult, combinations, etc.
2. List behaviors which he sees when people are involved in a verbal exchange, classify these behaviors according to whether he thinks they are constructive, and state his reasons why he classified them the way he did.	Constructive: listening, asking for clarification, providing verbal and non-verbal feedback, acceptance of ideas, etc. Non-Constructive: frequent interruptions, negative personal judgments, bringing up unrelated facts or information, etc.
3. Given a list of suggested behaviors for use in requesting assistance in performing a task, describe his perceptions of their meaning to him and compare his observations with those of other people.	Being courteous, clearly stating the problem, being brief, choosing an appropriate time to approach someone, etc.
4. Identify, explore, and discuss attitudes toward receiving information and advice, or instruction, and compare his thoughts with those of other people.	

5. Identify and explain methods used in establishing rapport with another individual and, given a situation in which establishing rapport is required, demonstrate the appropriate behaviors.	Greeting individual warmly, listening, providing opportunity for venting feelings, friendly attitude, etc.
6. Identify and explain methods of providing support to clients and, given a number of situations where support is required, demonstrate skill in applying appropriate techniques.	Encouragement, persuasion, praise (realistic), pointing out positive aspects of performance, etc.
7. Identify and explain methods of behavioral modification and, given a number of situations where behavior modification is required, demonstrate a skill in applying appropriate techniques.	Confrontation, suggesting alternative behaviors, withdrawing attention, removing individual from situation, diverting attention, offering energy - releasing activities, etc.
8. Identify and explain methods of helping a group of people interact with each other and, given a number of situations where interaction is called for, demonstrate skills in performing the appropriate behaviors.	Showing personal enthusiasm, giving withdrawn group members a helpful job to do, diverting a group disrupter, encouraging and rewarding those who are interacting, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
True-False, p. B-8
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
G&S: 1-3, p. C-7
F: 18, p. C-30; 38, p. C-35; 82, p. C-44

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

15. Teaching Methods: Methods for demonstrating activities, explaining procedures, and giving directions for the accomplishment of a task.

Overall Performance Objective: 1) To identify methods of describing, explaining, and demonstrating selected activities and 2) to demonstrate an acceptable skill in instructing an individual or group to do an activity.

Related Activities in Occupational Therapy: To give appropriate directions to clients in treatment; to aid client to perform specified tasks; and exchange information with staff.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe the details of a description and describe an unseen item to another individual so that he might recognize it.	Item size, shape, color, placement, etc.
2. List and describe the details of an explanation.	
3. Explain a procedures and its purpose to another individual.	Steps of and reasons for each step of such activities as a card game, baking cookies, assembling a model airplane, etc.
4. Identify details of demonstration procedures commonly used in occupational therapy.	Identifying key steps, positioning for visibility, explanation of steps, ordering of procedural steps, etc.
5. Demonstrate a selected activity to another individual or group.	Activities such as crafts or games, etc.
6. Apply elements of an explanation and demonstration to giving instructions for a selected activity to an individual who had had no previous experience with that activity.	

7. Apply observation methods to observe and describe another individual's performance of a given activity.	
8. Observe and decide whether or not the individual is performing well enough to complete the activity.	
9. Guide or lead another individual in the performance of a selected activity by applying techniques of explanation, demonstration, and communication.	
10. Support another individual in the performance of a selected activity by applying communication techniques.	Reinforcement, encouragement, persuasion, etc.
11. Given specific instructions to adapt explanations or demonstrations to the capability or disability of a client, apply appropriate adaptions to instructing or demonstrating a procedure to a given client.	Instructions: teach blind person to find his way around a room, show a mentally retarded individual how to saw wood, show a one-handed person how to peel vegetables, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Observational Techniques, p. B-12

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

16. Play Activities: Activities in which toys and perceptual-motor equipment are utilized for occupational therapy treatment or training.

Overall Performance Objective: 1) To identify toys and perceptual-motor equipment commonly used in occupational therapy and 2) to demonstrate the use of selected play and learning activities.

Related Activities in Occupational Therapy: To assist in instructing or guiding client in play or perceptual-motor activities as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify a given number of toys and materials commonly used in pediatric departments.	Balls, dolls, puppets, rocking horse, blocks, peg boards, etc.
2. Apply knowledge of human development and disabling conditions to discuss and demonstrate how toys and materials may be used and state the approximate age range for which they are suitable.	Balls: age 1-3; dropped, rolled, kicked. age 4-6; thrown, rolled, kicked, caught, etc.
3. Identify and describe the use of given perceptual-motor equipment items.	Balancing ball from boards, scooter boards, etc.
4. Given specific directions, describe and demonstrate the ways for using each of the above with occupational therapy clients.	Directions: how to slide down inclined surface on scooter board, how to use balance beam, etc.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Teacher-Student Group, p. A-6

Suggested Evaluation:
True-False, p. B-8
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 48, p. C-38; 91, p. C-46
References, p. C-63

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

17. Recreation Activities: Social and diversional activities of clients.

Overall Performance Objective: 1) To identify tools, materials, and skills involved in recreational activities commonly used in occupational therapy, 2) to identify resources for learning how to do recreational activities, and 3) to demonstrate skill in leading and participating in a selected group of recreational activities.

Related Activities in Occupational Therapy: To assist in planning and implementing client's recreational activities as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. List a number of table games commonly used for recreation in an occupational therapy department.	Cards, board games, paper and pencil games, etc.
2. List the materials needed to perform the above games.	Playing cards (regular and pinochle), commercially produced games, etc.
3. Demonstrate skill in playing or performing a given number of table games.	
4. List a number of group or party games.	Get acquainted games, memory and guessing games, group sings, etc.
5. Demonstrate skill in leading and participating in a given number of games.	
6. Identify a number of active skill games.	Ping-pong, badminton, volleyball, etc.
7. List materials and equipment needed to play active skill games.	Paddles, racquets, balls, etc.
8. Demonstrate skill in leading or playing a given number of active skill games.	

9. Identify a number of folk or square dances.	Virginia Reel, Hora, "Put Your Little Foot", etc.
10. List materials and equipment needed to perform these dances.	Records, guitars, songs, etc.
11. Demonstrate skill in performing a given number of dances.	
12. List materials needed to give a small group party or recreational activity for a given group of individuals.	Games, music, refreshments, etc.
13. Demonstrate skill in planning and leading a party or recreational activity.	
14. Identify audio-visual equipment commonly used for recreatinnal activities.	16mm. film projector, slide projector, record player, tape recorder, etc.
15. Demonstrate skill in operating a given number of different types of equipment.	Threading a film projector, putting slides in a carousel, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-64

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION APPLICATION MODULE

18. Crafts and Use of Craft Tools: Identification and construction of crafts commonly used in occupational therapy.

Overall Performance Objective: 1) To identify tools and materials, steps, and skills involved in crafts commonly used in occupational therapy departments and 2) to build or construct sample items in each of the major craft areas by applying his knowledge of tools, materials, safety techniques, and problem solving procedures.

Related Activities in Occupational Therapy: To prepare materials for client activity; ready area for client; construct materials and devices for clients; and assist client during treatment or training.

Suggested Objectives:	Examples:
The Learner Should:	
1. Name and describe the function of common hand or power tools and materials used in woodworking, plastics, and metal work.	
2. Name and describe construction procedures.	Cutting, joining, finishing, etc.
3. Use an appropriate number of tools, materials, and construction procedures and construct selected sample project(s).	Use saw, miter box, nails or corner brackets, glue, level, sandpaper, and by sawing, sanding, joining, and finishing to construct a project such as braid weaving frame.
4. Name and describe the function of common tools, equipment, and materials used in ceramics.	Kiln, kiln furniture, storage units, etc.
5. Name and describe common construction and decorating procedures used in ceramics.	Pinch pots, slab, coil, wheel construction, surface decoration, underglaze, overglaze, firing, etc.
6. Use selected tools and materials to construct an appropriate number of sample ceramic project(s).	

7.	Use construction, firing, and finishing techniques to complete a ceramic piece.	Wedging clay and forming a pinch pot, using inscribed or excised decoration and/or under or overglaze, etc.
8.	Name and describe the function of tools, materials, and equipment used in weaving.	
9.	Name and describe common types of weaving procedures.	Loom weaving, braid weaving, turkish knotting, etc.
10.	Construct an appropriate number of sample project(s) which require use of several yarns and several procedures.	
11.	Identify tools, materials, and equipment used in graphic arts.	
12.	Name and describe graphic arts procedures commonly used in occupational therapy.	Making diagrams, drawing, tracing patterns, painting, finger painting, paper sculpture, etc.
13.	Construct an appropriate number of sample project(s) using a variety of materials, tools, equipment, and procedures.	
14.	Identify basic elements of design.	Balance, symmetry, dimension, etc.
15.	Determine his choice of design elements and apply them in a graphic arts media.	Collage, drawing, painting, mobile, etc.
16.	Name and describe tools, equipment, and materials used in leatherwork.	
17.	Name and describe basic procedures in leatherwork and demonstrate an acceptable skill in each.	Carving, skiving, cutting patterns, lacing, etc.
18.	Name and describe tools, equipment, and materials used in needlework and sewing.	

19. Identify sewing procedures commonly used in occupational therapy.	Sewing on a machine, embroidery, needlepoint, knitting, macrame, etc.
20. Use a variety of tools and methods to construct a number of sample sewing project(s).	
21. Given an assortment of minor crafts from which to choose, locate instructions and resources for constructing items in the minor craft areas.	Minor crafts: candlemaking, scrap craft, cooper tooling, cooper enameling, flower making, mosaic, etc.
22. Construct an appropriate number of sample minor craft items.	
23. For all of the above listed tools, equipment, types of material, and construction procedures, identify and state hazards and precautions for use.	

Suggested Teaching Strategy:

Student Independent, p. A-8
Student-Student Group, p. A-7
Direct Communication, p. A-5

Suggested Evaluation:

True-False, p. B-8
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

FS: 4, p. C-23; 5-7, p. C-24
FL: 3 & 4, p. C-26; 5, p. C-27
F: 21 & 22, p. C-31
References, p. C-64

19. Work Area Maintenance: Keeping commonly used areas, equipment, tools, and materials clean, free of hazards, and in adequate working condition.

Overall Performance Objective: To identify and demonstrate skill in housekeeping, preventive maintenance, and simple maintenance procedures to a given area.

Related Activities in Occupational Therapy: To maintain occupational therapy work areas, tools, materials, and equipment at a functioning level and to assist client in maintaining clean work areas.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list housekeeping methods required to maintain functional level of work surfaces, equipment, and tools.	Wiping off tables and countertops, wiping down and oiling machinery, cleaning paint brushes, kiln, and sink, emptying sink trap, etc.
2. List and describe destructive procedures which impair function of tools and equipment.	Plugging the drains with non-soluable materials, leaving delicate machinery uncovered, allowing metal item to remain wet, not cleaning and storing brushes, etc.
3. Given the experience of operating a given number of tools and equipment with signs of malfunction, list parts which show signs of malfunction and identify which malfunctions he can repair.	Broken blades, broken warp threads, machine needing oil, lamp out in projector, uneven motor noises, etc.
4. Given a situation in which he cannot repair malfunctions, state the steps he should follow to get the equipment repaired or replaced.	Reporting to supervisor either verbally or in writing, etc.
5. Demonstrate an acceptable skill in maintaining given housekeeping standards over a given period of time.	Responsible for keeping specific tool cabinet neat and orderly, with tools in good condition for two weeks.

Suggested Teaching Strategy:

Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:

Multiple Choice, p. B-9
Observational Techniques, p. B-12

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

20. Inventory and Storage Methods: Procedures to follow in keeping an accurate record and appropriate place for commonly used equipment and supplies.

Overall Performance Objective: To identify and apply inventory and storage procedures commonly used in occupational therapy.

Related Activities in Occupational Therapy: To ready treatment area and materials for the client; assist client in replacing materials; assist in revising storage areas; unpack and store incoming items; and assist in maintaining specified inventory and supply level.

Suggested Objectives:	Examples:
The Learner Should:	
1. List materials and supplies commonly used in an occupational therapy department.	Paper, solvents, brushes, power tools, bulky equipment.
2. List and describe various types and fittings of storage units.	Open shelves, closed shelves, etc.
3. Discuss the advantages and disadvantages of the above units.	Open shelves: easy to get to, but dusty. Closed shelves: cleaner, big doors take up space. Low and high shelves: harder to reach than middle shelves, but good for getting items out of the way; sliding doors take up less room space than swinging doors, but create difficulties in removing and replacing items.
4. Explain where and how to store items.	Storing paper flat and away from light, storing solvents in fire-proof containers, avoiding bending brush bristles, keeping power tools and bulky equipment out of general line of traffic, storing grout in dry places, etc.

5. List and discuss methods of safely storing materials according to use, accessibility, size, and identifiability.	Labeling storage units and containers, storing like sized items together, most frequently used items in most accessible places, all materials for a given activity stored togetter, etc.
6. Identify and discuss hazardous storage methods.	Placing items in or near fire-prone areas, placing items in a way that there is a danger of their falling or cutting, placing items in areas where there is obstructed visibility, etc.
7. Given an occupational therapy work area, items commonly used, and an area for storing items, select items and replace them according to previously learned storage methods.	
8. Define the term "inventory".	
9. List methods of inventory.	Counting items, listing items as they are used, estimating remaining items by eye, etc.
10. Describe when accuracy is important in inventory procedures.	
11. Given a specific inventory form which includes items for inventory in an occupational therapy work area, inventory the items.	
12. Given a specific inventory number and frequency of use record for a given list of items in an occupational therapy work area, determine those items which are in short supply.	

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

21. Reporting: Methods of relating events and behavior.

Overall Performance Objective: 1) To identify the types of reports commonly used in occupational therapy, 2) to tabulate attendance data, 3) to fill in report forms, and 4) to observe and orally report client behavior and status.

Related Activities in Occupational Therapy: To inform and exchange information with supervisor and assist in maintaining departmental records.

Suggested Objectives:	Examples:
The Learner Should:	
1. Use a given number of attendance forms to tabulate daily, weekly, and monthly attendance.	Attendance charts, sign-in sheets, etc.
2. Identify, discuss, and demonstrate skill in methods of writing brief, factual reports for the purpose of reporting an incident.	State exactly what happened in the order it happened, state who was present, time, etc.
3. Given a description of a situation involving an accident, complete a commonly used incident or accident form.	Describe client using a cutting tool and cutting himself, etc.
4. Describe why the above forms are a necessary part of the occupational therapy department procedures.	Legal requirements, ethical aspects for proper client care, etc.
5. Identify methods and details of direct and concise reporting.	Methods: reporting only what one sees and hears, identifying and selecting information relevant to a given situation, organizing the information, etc. Details: behaviors, activities, physical status, etc. (see observation module).

6. Report verbally, using either formal or informal observation techniques, the behavior activities and physical condition of a selected individual or group in a specified situation.

Situations: A child drawing a picture, group discussion of party plans, talking with another about what he likes to do, filling in a behavioral observation form, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Observational Techniques, p. B-12

22. Sterilization Methods: A method of creating and maintaining a non-contageous environment. (Note: this may be an optional or alternative module depending upon potential work experience.)

Overall Performance Objective: To identify and apply commonly accepted aseptic and sterilization methods in his own performance to materials and equipment commonly used, and to client treatment situations.

Related Activities in Occupational Therapy: To prevent cross-infection of contagious diseases to clients or himself.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define terms related to sterilization and asepsis.	Clean, infectious, cross-infectious, contagious, etc.
2. List commonly used household and institutional solutions for cleaning and sterlizing equipment and materials.	
3. Given a list of specific materials and equipment used in occupational therapy, match a given solution with the appropriate equipment or material.	
4. List sources other than solutions used for sterilizing materials and equipment and describe the effects they have on given materials or equipment.	Heat: may melt some items, etc. Light: may bleach color, etc. Steam: shrinks wool, etc.
5. List materials and equipment upon which identified sterilization sources cannot be used.	Nonwashable items with multiple surfaces, large rugs, contaminated utensils, etc.
6. Identify and describe usual health establishment resources for having materials and equipment sterilized.	Laundry, hospital central supply service, etc.

7. Given a list of materials and equipment commonly used in an occupational therapy service, select appropriate resources for sterlizing those materials or equipment.	
8. Identify and describe aseptic techniques of putting on and removing articles.	Articles: gowns, masks, gloves, etc.
9. State importance of using these techniques.	
10. Identify and describe situations where asepsis is necessary.	Situations: To protect the clients from infection (such as burned patients, some surgical patients, etc.). To protect the worker from contact with or transmittal of infection (such as tuberculosis, infectious hepatitis, etc.).

Suggested Teaching Strategy:

Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:

True-False, p. B-8
Multiple Choice, p. B-9
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

FL: 1, p. C-26

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

INFORMATION-APPLICATION MODULE

23. Exercise Methods: Routine physical exercises used in occupational therapy. (Note: This module may be optional, depending upon potential work requirements.)

Overall Performance Objective: 1) To identify standardized exercises commonly used in occupational therapy settings, 2) to perform selected activities, and 3) to instruct another individual to perform an activity as specified.

Related Activities in Occupational Therapy: To assist client in specified therapeutic motor activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Name and describe a given number of techniques and the materials and equipment needed for each.	Techniques: Hand, arm, and finger powder board exercises, finger exercises, and range of motion patterns, etc. Materials: talc, board, finger exercise board, Herring Tracts, etc.
2. Given specific instructions, perform assigned exercise(s) as directed.	Powder board exercise for spreading fingers apart (abduction).
3. Given specific verbal and written instructions, demonstrate to and direct another individual in the performance of an exercise.	Skate board or tract exercise for specified range of motion, etc.
4. Given a description or demonstration of the correct performance of a specified exercise, observe an individual perform the exercise.	Supination, pronation - with elbow bent and gravity eliminated, etc.
5. Determine and report if the individual was performing the exercise correctly.	

Suggested Teaching Strategy:

- Teacher-Student Group, p. A-6
- Student-Student Group, p. A-7

Suggested Evaluation:

- Matching, p. B-9
- List, p. B-11
- Observational Techniques, p. B-12

24. Self-Care Activities and Devices: Procedures for and modifications of activities and equipment for assisting clients in independent self-care.

Overall Performance Objective: 1) To idenitfy and demonstrate specified self-care activities, 2) to identify self-care devices and explain their purposes, and 3) to change assistive devices as directed.

Related Activities in Occupational Therapy: To aid client in self-care activities and adapt self-care devices as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. List and classify self-care activities which are essential to performing activities of daily living according to type of function.	Dressing, putting on clothing, removing clothing, fastening fasteners. Eating with utensils, drinking with straw, cutting, etc. Grooming by combing hair, putting on make-up, brushing teeth, bathing, etc.
2. Demonstrate a specified self-care activity to an individual with a specified disability.	Teach hemiplegic to put on sling, etc.
3. List resources for instructions in demonstrating self-care activities to disabled individuals.	Instructional texts and manuals with instructions for self-care, etc.
4. Recognize, name, and identify a given number of assistive devices.	Swivel spoon, plate guard, long handled shoe horn, "velcro", etc.
5. Explain how the above may be used to assist disabled individuals.	Plate guard: as a "pusher" for food, etc.
6. Recognize and identify given alterations or adaptations of a given list of ordinary utensils or materials.	Built-up handles, "velcro" closures, straw holders, electric shaver holder, etc.
7. Demonstrate skills in making alterations on a given item according to specific instructions.	Attach "velcro" closures, put "hook" on a zipper, build-up handle to specified thickness, etc.

8. List ways to alter commercially available assistive devices.	Adding a rim to a lapboard, operating the stops on a swivel spoon, etc.
9. Demonstrate skill in making specified alterations on a given item.	
10. List resources for instructions in fabricating assistive devices.	Items: cardholder, cut-out seatboard, foot board, etc. Resources: texts, manuals, catalogs,
11. Construct a specified device to specified measurements according to given instructions.	Lap-board, cardholder, neck pillow, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
S: 7-11, p. C-16; 13, p. C-17
F: 37 & 40, p. C-35; 51, p. C-39; 119, p. C-51
References, p. C-72

25. Assembly of Splints and Supportive Devices: Use of appropriate tools; equipment, and materials to produce devices according to specifications.

Overall Performance Objective: 1) To identify tools, equipment, and materials used for constructing splints and supportive devices, 2) to identify construction procedures required for commonly used materials, 3) to recognize signs of client discomfort and poor fit of device, and 4) to fabricate a given device or part according to exact specifications.

Related Activities in Occupational Therapy: To assist in facricating, modifying, or adapting slings, splints, or supportive devices and report to client use of device.

Suggesged Objectives:	Examples:
The Learner Should:	
1. Identify and explain the use of tools, materials, and equipment commonly used in fabrication of splints and supportive devices.	Webbing, plastics, wood, rivets, snaps, heat gun, drill, padding, lining materials, foam, etc.
2. Identify commonly used fabrication procedures.	Attaching rivets, "velcro", bending and stretching plastics, cutting and filing wood and plastics, etc.
3. Given exact specifications for fabricating a sample device(s), construct the device(s) according to specifications.	Cut-out board, hemiplegic sling, lap-board, cuff, etc.
4. Describe and identify given signs which may indicate discomfort and poor fit of a given device.	Red or white pressure spots, signs of poor circulation in a strap area, verbal reports of discomfort, perspiration under a splint surface, etc.
5. Demonstrate an acceptable skill in recognizing, noting and reporting the above signs to appropriate personnel.	

Suggested Teaching Strategy:
- Direct Communication, p. A-5
- Student-Student Group, p. A-7

Suggested Evaluation:
- List, p. B-11
- Observational Techniques, p. B-12

26. Preparation for Client Activities: Activities involved in the preparation for client treatment.

Overall Performance Objective: To prepare the treatment area for client activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Read schedule to determine which clients will be treated, when, and for how long.	
2. Arrange daily work schedule.	Review treatment instruction and confer with staff.
3. Confer with staff.	
4. Gather material.	Materials for client activity; equipment, splints and slings. Arranging furniture according to client dysfunction or group needs.
5. Construct items for special projects.	Holiday parties, decorations, group games, etc.
6. Prepare art and craft projects to be finished by client or to be used as samples or prizes.	Drawing, tracing patterns, forming, cutting, attaching materials, etc.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

27. Client Transportation and Transfer: Activities involved in client transportation and transfer.

Overall Performance Objective: To assist client to and from treatment or training area.

Suggested Objectives:	Examples:
The Learner Should:	
1. Lift or position client when client is unable to do so.	Into and out of bed, wheelchair, stand-in-table.
2. Assist and instruct client in methods of transferring.	From bed to wheelchair or to standing position.
3. Assist client in ambulation.	Push wheelchair. Walking with or assisting client to area.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

28. Assistance in Treatment: Activities involved in providing assistance in treatment.

Overall Performance Objective: To assist in the treatment program.

Suggested Objectives:	Examples:
The Learner Should:	
1. Orient client to treatment area.	
2. Explain room or workshop.	Kind, location, and use of equipment.
3. Adapt explanation to client's capabilities.	Blindness, wheelchair or walker, severe regression, culture differences.
4. Prepare client for treatment.	Arrange materials or equipment. Position client. Change or arrange clothing as directed.
5. Establish rapport and explain task or activity to client.	Ask client how he is feeling, how he has been getting along since last visit, etc.
6. Explain and demonstrate procedures.	Provide written directions when appropriate.
7. Guide client participation in activities.	Observe performance. Aid and encourage participation. Participate with client in activity.
8. Assist client in clearing work area.	Help client sort materials. Clean work surfaces.
9. Lead group activities during supervisor's absence.	

PREPARATION FOR OCCUPATIONAL TRERAPY AIDE

CLINICAL APPLICATION MODULE

29. Developmental Cognitive-Perceptual-Motor Activities: Activities involved in developmental and cognitive-perceptual-motor treatment implementation.

Overall Performance Objective: To assist in implementing developmental and cognitive-perceptual-motor activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Instruct client in activity.	Explain activity. Demonstrate activity.
2. Demonstrate special learning equipment as assigned.	Balancing ball or board, wheeled pivot prone board, etc.
3. Encourage client participation.	
4. Observe client's performance.	Use informal observation methods.
5. Vary and limit activity, as directed, according to client's attention span.	

30. Psychosocial Activities: Activities involved in assisting in psychosocial treatment implementation.

Overall Performance Objective: To assist in specified group or individual activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Aid client in specified task-oriented group or individual activity.	Arts and crafts, cooking a meal for other clients, preparing ward decorations or preparing materials for use by community organizations, etc.
2. Support and encourage client's adaptive behavior according to treatment plan and directions.	Encourage desired behavior, set limits when appropriate, provide opportunities for success experiences, etc., by talking with client concerning his behavior and suggesting alternative behaviors.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

31. Motor and Self-Care Activities: Activities involved in assisting in motor and self-care treatment implementation.

Overall Performance Objective: To assist client in specified motor activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Lead client in activity or exercise.	Weaving on loom, finger exercises, foot pedaled jig-saw, etc.
2. Assist client in performing specified activity of daily living.	Demonstrate activity. Explain activity. Assist in client's performance of the activity.
3. Encourage and support client.	Establishing rapport with client and encouraging him to care for himself as much as possible.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

32. Construction of Supportive or Assistive Devices: Activities involved in fabricating supportive or assistive devices.

Overall Performance Objective: To construct, modify, or adapt supportive or assistive devices as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. Fabricate, modify, or adapt items as directed to assist client in communicating, eating, reaching, and holding.	Pencil holders, built-up paint brushes, head bands with pointers, page turners, book holders. Adapted spoons, cuphandles, plates, guards, and other eating utensils. Reachers, lapboards, cupholders, ashtrays. "Velcro" fasteners, shoe fasteners, built-up combs, toothbrushes, and long shoe horns.
2. Construct supportive devices as directed.	Footboards, lapboards, cut-out seat boards, posture boards, transfer boards, cut-away boots, safety belts, etc. Cut, sand, and file material and attach fasteners.
3. Construct splints according to specific directions.	Cut and shape. Sand and file edges. Attach fasteners.
4. Fabricate slings as directed.	Sewing according to pattern. Attach fasteners as directed.
5. Inform supervisor of signs which might indicate discomfort or poor fit of device(s).	Observe for white or red pressure spots. Report to supervisor any observations.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

33. **Assistance in General Activities:** Activities involved in assisting in general recreational and arts and crafts activities.

Overall Performance Objective: To implement general recreational and arts and crafts activities in facilities such as nursing homes, homes for crippled children, and general and psychiatric hospitals.

Suggested Objectives:	Examples:
The Learner Should:	
1. Organize specified activities as directed.	Arts and crafts sessions, care games, music, gardening, special events such as parties and picnics, movie films, arranging for volunteer entertainers, song fests, magic shows, lecturers, and parties.
2. Gather clients together.	
3. Lead and supervise client group activity.	Use methods of supervision and explanation.
4. Direct activity sessions on individual or group basis.	Give directions. Explain and demonstrate activity. Aid client in project completion.
5. Assist entertainers.	Volunteer entertainers, operate projector, etc.
6. Aid and encourage individual client participation.	Explain activities available to client. Demonstrate activity. Help client participate during activity.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

34. Reporting Treatment Activities: Tasks involved in reporting treatment.

Overall Performance Objective: To exchange information with staff regarding treatment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Report attendance.	Tabulate numbers of clients, names, and times attended.
2. Report client activity, behavior, and skills.	Observe client performance. Report performances. Attend meetings in which client's treatment program is discussed. Complete accident or incident reports following established procedure.
3. Receive advice and instruction from supervisor and treatment team.	Confer with supervisor to help determine future treatment activities. Receive information about client during meetings with supervisor and treatment team.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

35. Maintenance of Materials, Equipment, and Supplies: Activities involved in providing assistance in the maintenance of materials, equipment, and supplies.

Overall Performance Objective: To assist in maintaining materials and work areas at a functional level.

Suggested Objectives:	Examples:
The Learner Should:	
1. Check daily availability of supplies and materials.	List materials as used. Observe remaining supplies. Notify supervisor on status of materials.
2. Prepare or maintain materials or equipment in working order.	Disinfect materials by such methods as washing or wiping items in appropriate solution, exposing items to hear or light, and carrying items to sterilization service to be disinfected.
3. Position and store materials and equipment in appropriate place.	Determine appropriate place for storage, label storage areas, and unpack and store supplies.
4. Revise and clean storage area periodically.	Removing materials, cleaning shelves and materials, replacing according to use, accessability and size, disposing of unneeded items, etc.

PREPARATION FOR OCCUPATIONAL THERAPY AIDE

CLINICAL APPLICATION MODULE

36. Self Education: Activities involved in improving knowledge and skill.

Overall Performance Objective: To seek and obtain information and supervised practice in skill and knowledge areas related to occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Participate in educational programs.	Conferences, lectures, meetings, in-service education, workshops, etc.
2. Receive instruction.	
3. Exchange information.	Techniques and methods.
4. Read and study manuals and instructions.	Techniques and methods related to work.
5. Counsel with supervisor.	Discuss information, methods, problems and personal work skills.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

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Curriculum Guide for the Preparation of:
Occupational Therapy Technician

INTRODUCTION

THE OCCUPATIONAL THERAPY TECHNICIAN FUNCTION

The data base for development of this curriculum guide is the job description developed during the first year of this project, of which a summary is presented below. Comprehensive job descriptions are presented in the Job Description Manual and complete descriptions of procedures for development of the job descriptions and the curriculum guides are presented in the Procedure Manual from this project.

This curriculum guide has been developed to prepare individuals to perform the following tasks:

Occupational Therapy Technician (Program Implementation)

General Definition: Organizes and implements occupational therapy activities in hospitals, client's home, or other settings to habilitate or rehabilitate physically or psychosocially disabled clients:

Plans occupational therapy activities previously designed to assist individual client to regain or maintain physical and psychosocial function and to assist client adjustment to disability. Treats or trains client according to established goals by applying and adapting plan and modifying activity to meet specific client situations to obtain therapy goals. Confers with staff for guidance and aid to discuss and evaluate client's function, progress, and plan for therapy. Schedules and coordinates client treatment or training by reviewing availability of client, staff, and facilities, and by verifying "treatment or training" work ability with both client and staff. Tests client's abilities by conducting assigned standard tests or evaluations and by recording results in order to convey information for evaluation purposes.

Guides and encourages client to develop higher level of maturation by arranging activities typical of normal developmental continuum and by aiding behavioral modification. Guides client with development of perceptual recognition and discrimination by directing activities according to treatment plan.

Guides and modifies behavior of client demonstrating psychosocial dysfunction by participating in interpersonal social group sessions, providing task or work-oriented group activities, and by suggesting client activities outside institutional setting.

Implements and instructs client's therapeutic motor activities by planning routine progression and by leading and demonstrating activities, including body movements, to promote optimal physical function within disability limits. Selects, makes, or provides client with self-help devices. Fabricates splints according to instructions. Modifies, adjusts, and fabricates body supports or controls. Examines and tests client use of prosthetic device by conducting standard checkout procedures and by conferring with prosthetist. Trains client in use of device by presenting problem solving situations that will later be utilized in daily life. Instructs client in methods of self-care, housekeeping, and child-care tasks by demonstrating such tasks as grooming, feeding, dressing, cooking, or cleaning, using principles of work simplification, substitute motions, and assistive devices.

Trains client on prevocational basis by evaluating work potential (such as work habits, work skills, work tolerance levels), teaching skills, and supervising practice to prepare for vocational training to enhance client employability in sheltered setting.

Plans and implements arts and crafts activities to meet client's activity needs, interests, and skills by providing various craft media in variety of settings, such as health care facilities, day-care centers, sheltered workshops, and client's home. Implements and coordinates recreational activities and client services to community service by suggesting client service projects. Suggests special services for homebound clients by exchanging information with social service staff or volunteer agencies to arrange for them to provide service (such as reading to blind, shopping or tutoring).

Informs and confers with client's relatives or health care workers in home or establishment by writing periodic reports, by demonstrating methods and use of equipment, and by discussing client's capabilities and problems.

Reports client responses to supervisor. Documents evaluation, implementation, and integration of treatment or training and client progress by writing and distributing reports, or by reporting verbally to promote communication, to evaluate progress, and to maintain legal and financial records.

Recommends termination of formal occupational therapy services by recording progress and suggesting future recourse. Readies client for discharge by implementing discharge plans.

Orients and trains assigned staff, students, volunteers, and conference or workshop groups by guiding tours of establishment, by discussing client needs or treatment, and by instructing specific therapy techniques.

Performs related duties: Verifies purchase orders, estimates time required to deplete supplies, designs and allocates storage space, and determines methods of storage in order to maintain equipment, materials, and supplies of unit. May compile statistics for research project or for program planning for consultee agency by tabulating data, interviewing clients or others, and completing forms to record and convey data to research team or consultant.

Receives instruction during in-service training and continuing education by attending conferences, seminars, and training sessions.

May promote overall establishment program by performing public relation activities such as speaking to community groups about clients' present and future needs.

May participate in coordinating and establishing programs, policies, and procedures by exchanging views and data in formal and informal conferences. May assist in personnel recruitment by informing supervisor of known qualified individuals seeking employment, and by interviewing prospective employees as assigned.

Qualifications for Entry into the Curriculum

In order to delineate the attitudes, aptitudes, and educational level required for entry into each curriculum level, selection specifications were developed. (Detailed descriptions of their development are included in Appendix D of this volume.) The selection specifications for entry into the Occupational Therapy Technician Curriculum are:

1. Have a GED level of 4. (A specific description of General Educational Development at level 4 is presented on page 99).
2. Be in the top 50% of the population in intelligence.
3. Be in the top 50% of the population in verbal ability.
4. Desire to work with people for their presumed good.
5. Desire activities resulting in prestige or the esteem of others.
6. Desire activities involving people and the communication of ideas.
7. Desire to deal with people beyond giving and receiving instruction.
8. Desire to influence people and their opinions, attitudes, or judgments.
9. Desire indoor employment.
10. Desire work with mostly light or sedentary physical activity.
11. Be able to devote 6 months to a year to training.

The job description lists the performances expected of the learner at the completion of the curriculum; the selection specifications are the requirements for entry into the curriculum; the curriculum guide suggests learning experiences which enable an individual who meets the selection specifications to obtain competencies required for job performance.

Some suggestions for structuring the Occupational Therapy Technician Curriculum are provided in the following paragraphs.

DEVELOPMENT OF CURRICULUM FOR THE OCCUPATIONAL THERAPY TECHNICIAN

The modules were designed as "building blocks" for learning knowledges and skills. Each module is probably related to all of the others in some fashion; however, these module "blocks" may be put together in many varied ways.

Curriculum development from this guide may be approached as four interrelated processes:

1. Clustering modules to develop tentative course work.
2. Sequencing to include placement of course work in a learning continuum.
3. Assembly of course work to include instructional objectives, instructional strategies, media, evaluation methods, and time span of course.
4. Determination and placement of affective learning.

GENERAL EDUCATIONAL DEVELOPMENT SCALE*

LEVEL IV (GRADES 9–12)

Language Development	Language Curriculum		Reasoning Development	Mathematical Development	Mathematics Curriculum	
Speak on a variety of subjects, or compose business letters, reports, summaries or expositions, conforming to rules of grammar, continuity, diction, coordination, length, harmony and sequences of sentences and paragraphs.	**Punctuation:**	Review and mastery of all rules of punctuation and capitalization.	Apply principles of rational systems to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists, interpret a variety of instructions furnished in written, oral, diagrammatic or schedule form.	Perform arithmetic, algebraic, and geometric operations as applied to standard situations, perform shop mathematics operations in practical application to the manual arts.	**Algebra:**	Elementary algebra with formal study of number systems, and sets and set operation. Operations on polynomials and rational expressions; solution of equations and inequalities; use of deducation and proof. Extended study of the systems of real numbers; linear, quadratic, rational, exponential, logarithmic, angle and circular functions, inverse functions; related algebraic functions; limits and continuity, probability and statistical inference.
	Reference Work:	Dictionary, encyclopedia, atlas, thesaurus, manuals, periodicals, newspapers, journals, book and play reviews.			**Geometry:**	Deductive axiomatic geometry, plane and solid, using the properties of real numbers; the introduction and use of rectangular coordinates. Extension of trigonometry and solid geometry.
	Grammar:	Mastery and facility in the use of the rules and concepts of person, gender, number, case, tense and mood.				Technical/Vocational School
	Parts of Speech:	Verbs: Strong and weak, transitive and intransitive, auxiliary, regular. Conjugation.			**Shop Math:**	Review and extension of principles of common and decimal fractions, percentage, ratio, and proportion.
		Nouns: Common and proper, collective, concrete and abstract; inflections; gender.				Practical computation, logarithms, slide rule. Practical algebra. Metric geometry. Essentials of trigonometry Formulas for computing ratios of pulleys and gears.
		Pronouns: Personal, demonstrative, relative, numerical, reciprocal.				Practical Physics: formulas for work and power, etc.
		Adjectives: Common, proper, descriptive, limiting, articles, position in sentence; comparative degrees.				
		Adverbs: Simple, conjunctive; forms; comparison.				
		Conjunctions: Coordinating, subordinating.				
		Interjections.				
		Propositions.				
	Reading:	Variety of textbooks; fiction and non-fiction; newspapers, magazines.				
	Compositions:	Preparation of outlines; preparation of themes, emphasizing length, harmony, sequence, and variety of sentences and paragraph structure. Selection of wordage according to subject matter and audience. Coordination, subordination and parallelism of thoughts.				
	Speaking:	Participation in panel discussions and dramatizations. Practice of social introductions and other amenities. Presentation of impromptu speeches to develop skill in extemporaneous speaking.				

* From: Guide for Relating General Educational Development to Educational Curriculum: U. S. Department of Labor, Manpower Administration.

11. Module Clusters: Decisions must be made as to how modules will be grouped. Each module will remain as is, be combined with others, or be divided to form a course of study. Several approaches are possible.

The chart on page 101 indicates a number of ways in which modules may be clustered. It may be read in the same manner as a mileage chart or a road map. Each module is listed across both the vertical and the horizontal axis. Each of the cells on the chart contains a letter which indicates a relationship between a module on the vertical axis and a module on the horizontal axis. Suggested relationships between modules are keyed as follows:

I = *the two modules may be learned independently of each other.*
R = *the modules are related to each other. There is a potential for sequencing the two modules along a linear time continuum.*
C = *Module content provides close intrinsic relationships and may potentially be clustered.*
S = *The modules may be learned simultaneously or concurrent[illegible] in time. Content areas are extrinsically related, and each may enhance the learning of the other.*
/ = *May be read as "or" or "and". In some cases, when 2 modules are related (R) to each other, aspects of each may be clustered (C) or learned simultaneously (S).*

Assume that one wanted to determine the relationship between two modules, for example, module #22, "Manual Arts" and module #28 "Activity Analysis". Locate #22 on the vertical axis and #28 on the horizontal axis. At the point where the lines for #22 and #28 cross will be found the code *R/C* which indicates that the two are related to each other, and that it might be beneficial to cluster them into the same academic course. The determination of module relationships is the responsibility of the guide user, however, the suggestions presented on page 101 may provide assistance for this task. If one wishes to obtain an overall impression of potential clustering or simultaneous learnings, one can look for "*R's*", "*C's*", or "*R/C's*" and "*R/S's*" within the body of the chart to determine which modules may be clustered or learned simultaneously.

SUGGESTED MODULE RELATIONSHIPS FOR SEQUENCING AND CLUSTERING

	59. Public Information	58. Research Assistance	57. Consultation Assistance	56. In-Service Education	55. Self-Education	54. Recruitment Assist.	53. Materials Maintenance	52. Program Participation	51. Termination & Follow-Up	50. Treatment Reporting	49. Client's Family & Commun.	48. General Act. Programs	47. Prevocational Activities	46. Psychosocial Activities	45. Therapeutic Motor Act.	44. C.P.M. Activities	43. Tx Implementation	42. Activities Planning	41. Client Evaluation	40. Intake
BASIC INFORMATION																				
1. Orientation to O.T.	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
2. Growth & Development	I	I	R	R	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	R
3. Cultural Differences	I	I	R	R	R	I	I	R	R	R	R	R	R	R	R	R	R	R	R	R
4. Normal Psychology	R	I	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R
5. Human Struct. & Funct.	I	I	I	R	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	I
6. Functional Anatomy	I	I	I	R	R	I	R	R	R	R	R	R	R	I	R	R	R	R	R	I
7. Communication	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
8. Medical Terminology	I	I	R	R	R	I	I	R	I	R	R	I	R	R	R	R	R	R	R	R
9. Abnormal Psychology	R	R	I	R	R	I	R	I	R	R	R	R	R	R	R	R	R	R	R	R
10. Physical Dysfunction	R	R	I	R	R	I	R	I	R	R	R	R	R	R	R	I	R	R	R	R
INFORMATION APPLICATION																				
11. Problem-Solving for Learn	C	C	I	I	C	I	I	C	C	I	C	C	C	I	I	C	I	I	I	I
12. Observation Skills	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R
13. Work Simplification	I	R	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	I
14. Safety & First Aid	I	I	I	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R
15. Interpersonal Skills	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
16. Instruction	R	R	R	R/C	R/C	I	I	R	R	I	R	R	R	R	R	R	R	R	R	R
17. Community Resources	R	R	R	R	R	R	R	R	R	R	R/C	R/C	R	R	R	R	R	R	R	R
18. Materials Maintenance Sk.	I	I	R	R	R	I	R/C	R	R	I	R	R	R	R	R	R	R	R	R	I
19. Developmental Facilitation	R	R	R	R	R	I	R	R	R	R	R	R	I	R	R	R	R	R	R	R
20. Recreational Activities	R	R	R	R	R	I	R	R	R	R	R	R/C	I	R	R	R	R	R	R	R
21. Applied Design	I	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	I
22. Manual Arts	I	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	I
23. Ceramics	I	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	I
24. Sewing & Needlework	I	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	I
25. Weaving, Knotting	I	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	I	I
26. Surplus Materials	R	I	R	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	I	I
27. Optional Media	I	I	I	I	R/C	I	R	R	R	I	R	R	R	R	R	R	R	R	I	I
28. Activity Analysis	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R	R/C	R	R
29. Reporting	R	R	R	R	R	R	R	R	R	R/C	R	R	R	R	R	R	R	R	R	R
30. Transferring Clients	I	I	I	R	R	I	I	R	I	I	R	I	R	R	R	R	R/C	R	R	R
31. Helping Relationship	R	I	I	R	R/C	I	I	I	R	R	R	R	R/C	R/C	R/C	R/C	R/C	R	R	R
32. Task Group Procedures	I	I	R	R	R/C	I	I	R/C	I	I	R	R/C	R	R/C	R	R	R	R	R	I
33. Motor Activities	I	I	R	R	R/C	I	R	R	R	R	R	R	R	R	R/C	R/C	R/C	R/C	R	R
34. Device Fabrication	R	I	I	R	R/C	I	R	R	R	R	R	I	I	I	R/C	R	R	R	I	I
35. A.D.L. Training	R	I	R	R	R/C	I	R	R	R	R	R	R	R	R/C	R/C	R/C	R/C	R	R/C	R
36. Supervisory Skills	I	I	I	R	R	I	R/C	R	R	I	R	R/C	R/C	R	I	R	R	R	R	R
37. Vocational Readiness	R	I	I	R	R/C	I	R	R	R	R	R	R	R	R/C	R/C	R/C	R	R	R/C	R
38. Daily Problem-Solving	R/C	R/C	R/C	R/C	R/C	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R	R/C	R/C	R/C	R/C	R
39. Evaluation Methods	R	R	R	R	R/C	I	R	R	R	R/C	R	I	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C
CLINICAL APPLICATION																				
40. Intake	R	I	I	I	R	I	I	R/C	R	R/C	R	I	R/C	R/C	R/C	R/C	R/C	R	R/C	
41. Client Evaluation	R	I	R	R	R/C	I	R	R/C	R	R/C	R	R	R/C	R/C	R/C	R/C	R/C	R/C		
42. Activities Planning	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C			
43. Tx Implementation	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C				
44. C.P.M. Activities	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	I	R	R	R/C					
45. Therapeutic Motor Act.	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	R	R	R						
46. Psychosocial Activities	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	R/C	R							
47. Prevocational Activities	R	I	R	R	R/C	I	R/C	R/C	R/C	R/C	R/C	R								
48. General Act. Programs	R	I	R	R	R/C	I	R/C	R/C	R	R	R/C									
49. Client's Family & Commun.	R	I	R	R	R/C	I	R	R/C	R/C	R/C										
50. Treatment Reporting	R	R	R	R	R/C	I	I	R/C	R/C											
51. Termination & Follow-Up	I	R	R	R	R	I	R	R/C												
52. Program Participation	R	R/C	R/C	R/C	R/C	R/C	R/C													
53. Materials Maintenance	I	R	R/C	R/C	R/C	I														
54. Recruitment Assist.	R	I	R/C	R	R															
55. Self-Education	R	R/C	R/C	R/C																
56. In-Service Education	R	R	R																	
57. Consultation Assistance	I	R																		
58. Research Assistance	I																			
59. Public Information																				

	39. Evaluation Methods	38. Daily Problem-Solving	37. Vocational Readiness	36. Supervisory Skills	35. A.D.L. Training	34. Device Fabrication	33. Motor Activities	32. Task Group Procedures	31. Helping Relationship	30. Transferring Clients	29. Reporting	28. Activity Analysis	27. Optional Media	26. Surplus Materials	25. Weaving, Knotting	24. Sewing & Needlework	23. Ceramics	22. Manual Arts	21. Applied Design	20. Recreational Activities	19. Developmental Facilitation	18. Materials Maintenance Sk.	17. Community Resources	16. Instruction	15. Interpersonal Skills	14. Safety & First Aid	13. Work Simplification	12. Observation Skills	11. Problem-Solving for Learn
BASIC INFORMATION																													
1. Orientation to O.T.	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	C
2. Growth & Development	R	R/C	R	R	R	R	R	R	R	R	I	R/C	R	I	I	I	I	I	I	R/C	R/C	I	R	R	R	R	R	R	C
3. Cultural Differences	R	R/C	R	R	R	I	I	C/S	I/S	R	R	R	R	R	R	R	R	R	R	R/S	[illegible]	I	R/S	R	R/C	R	R	R	C
4. Normal Psychology	R	R/C	R	R	R	R	I	R/C	R/C	R	R	R	R	R	R	R	R	R	R	R/S	R/C	I	R	R/C	R/C	R	R	R	I
5. Human Struct. & Funct.	R	R/C	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	C
6. Functional Anatomy	R	R/C	R	I	R	R/C	R/C	I	I	R/C	R	R/C	R	R	R	R	R	R	R	R	R	R	I	R	I	R	R/C	R	C
7. Communication	R	R/C	R	R	R	R	R	R/C	R	R	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R/C	R/C	R	R	R	C
8. Medical Terminology	R	R/C	R	I	R	R	R	I	I	R	R/C	R	I	I	I	I	I	I	I	I	I	I	I	I	[illegible]	R	I	R	C
9. Abnormal Psychology	R	R/I	R	I	R	I	I	R	R/S	I	R	R	I	I	I	I	I	I	I	R	R	I	R	I	R	R	R	R	C
10. Physical Dysfunction	R	R/C	R	I	R	R	R	I	R	R/C	R	R	I	I	I	I	I	I	I	R	R	I	R	I	I	R	R	R	C
INFORMATION APPLICATION																													
11. Problem-Solving for Learn	C	I	I	C	C	C	C	C	I	I	I	I	I	I	C	C	C	C	C	C	C	I	I	I	I	C	C	C	
12. Observation Skills	R	R/C	R	R	R	R	R	R	R	R	R/C	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R		
13. Work Simplification	R	R/C	R/C	R	R/C	R	R	R	R	R/C	R	R/S	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R	R	R/C	R	R/C	I	R/S			
14. Safety & First Aid	R	R/C	R	R	R	R	R	I	I	R/C	R	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R	R/C	I				
15. Interpersonal Skills	R	R/C	R	I/S	R	R	R	C/C	I/C	R	R	R	R	R	R	R	R	R	R	R	R	R	R	I/C					
16. Instruction	R	R/C	R/C	R	R/C	R	R/C	R	R	R	I	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	I	I						
17. Community Resources	R	R/C	R	R	R	R	R	R	R	I	R	R	R/C	R/C	R	R	R	R	R	R	R	R/C							
18. Materials Maintenance Sk.	I	R/C	I	R	R	R	I	I	I	R	I	I	R	R	R/C	R/C	R/C	R/C	R/C	R	R								
19. Developmental Facilitation	R	R/C	I	R	R	R	I	I	I	R	R	C/S	C/S	I/C	R	R	R	R	R	C/S									
20. Recreational Activities	R	R/C	I	R	R	R	R	R	R	R	R	C/S	C/C	C/S	R	R	R	R	R										
21. Applied Design	R	R/C	R	R	I	R	R	I	I	I	I	C/S	C/C	C/S	R/C	R/C	R/C	R/C											
22. Manual Arts	R	R/C	R	R	R/S	I/S	R	I	I	I	I	C/S	C/S	C/S	R	R	R												
23. Ceramics	R	R/C	R	R	I	I	R	I	I	I	I	C/S	C/S	C/S	R	R													
24. Sewing & Needlework	R	R/S	R	R	R/S	R/S	R	I	I	I	I	C/S	C/S	C/S	C/S														
25. Weaving, Knotting	I	R/C	R	R	I	I	R	I	I	I	I	C/S	C/S	C/S															
26. Surplus Materials	I	R/C	R	R	R/S	R/C	R	I	I	I	I	C/S	C/S																
27. Optional Media	I	R/C	R	R	R	R/C	R	I	I	I	I	C/S																	
28. Activity Analysis	R	R/C	R	R	R	I	R/C	R/C	R/C	R/C	R																		
29. Reporting	R/S	R/C	R	R	R/S	R	R/S	R/S	R/C	R																			
30. Transferring Clients	R	R/C	R	R	R/C	R	R/C	I	I																				
31. Helping Relationship	R	R/C	R/C	R	C/S	I	R/C	R/C																					
32. Task Group Procedures	R	R/C	R	R	R	I	R																						
33. Motor Activities	R/C	R/C	R	R	C/S	C/S																							
34. Device Fabrication	R	R/C	R	I	C/S																								
35. A.D.L. Training	R/C	R/C	R	R																									
36. Supervisory Skills	R	R/C	R/C																										
37. Vocational Readiness	R/C	R/C																											
38. Daily Problem-Solving	R/C																												
39. Evaluation Methods																													

	10. Physical Dysfunction	9. Abnormal Psychology	8. Medical Terminology	7. Communication	6. Functional Anatomy	5. Human Struct. & Funct.	4. Normal Psychology	3. Cultural Differences	2. Growth & Development
BASIC INFORMATION									
1. Orientation to O.T.	R/C	R	R/S	R/S	R	R	R	R	R/C
2. Growth & Development	R	R	R/S	R/S	R	R	R/S	R/S	
3. Cultural Differences	R	R	R	R/S	I	I	R/S		
4. Normal Psychology	R	R/C	R/C	R/S	I	R/C			
5. Human Struct. & Funct.	R	R	R/C	I	R/C				
6. Functional Anatomy	R/C	R	R/C	I					
7. Communication	I	R	I						
8. Medical Terminology	R/C	R/C							
9. Abnormal Psychology	R/C								
10. Physical Dysfunction									

Legend
I = independent to
R = related to
C = clustered with
S = simultaneous with
/ = or

2. Sequencing of course work: Decisions concerning placement of course work in a learning continuum are interdependent with decisions concerning course work content. Consideration must be given to prior, concurrent, and subsequent learning for each course. For example, should the module for "Normal Human Development" be learned prior to, concurrent with, or after the modules for "Introduction to Occupational Therapy" and "Normal Human Structure and Function"? These decisions are dependent upon the course content vis-a-vis the learner's knowledge and aptitudes and within the context of the institutional setting. Again, the chart on page 101 may give some assistance.

   Modules are listed on each axis in a linear learning sequence. They are grouped according to the content area and in increasing complexity of learning. However, learning is rarely linear. For example, module #12, "Abnormal Psychology", may not require #6, "Functional Anatomy", as a prerequisite, but it may require #4, "Normal Human Psychology". All three of those modules may be prerequisite to #28, "Activity Analysis and Planning". The use of the chart to determine suggested, related and simultaneous learnings should provide some direction for designing alternative course sequences for a variety of learners in several different settings. One potential sequencing pattern for the modules contained in this guide is presented on page 103.

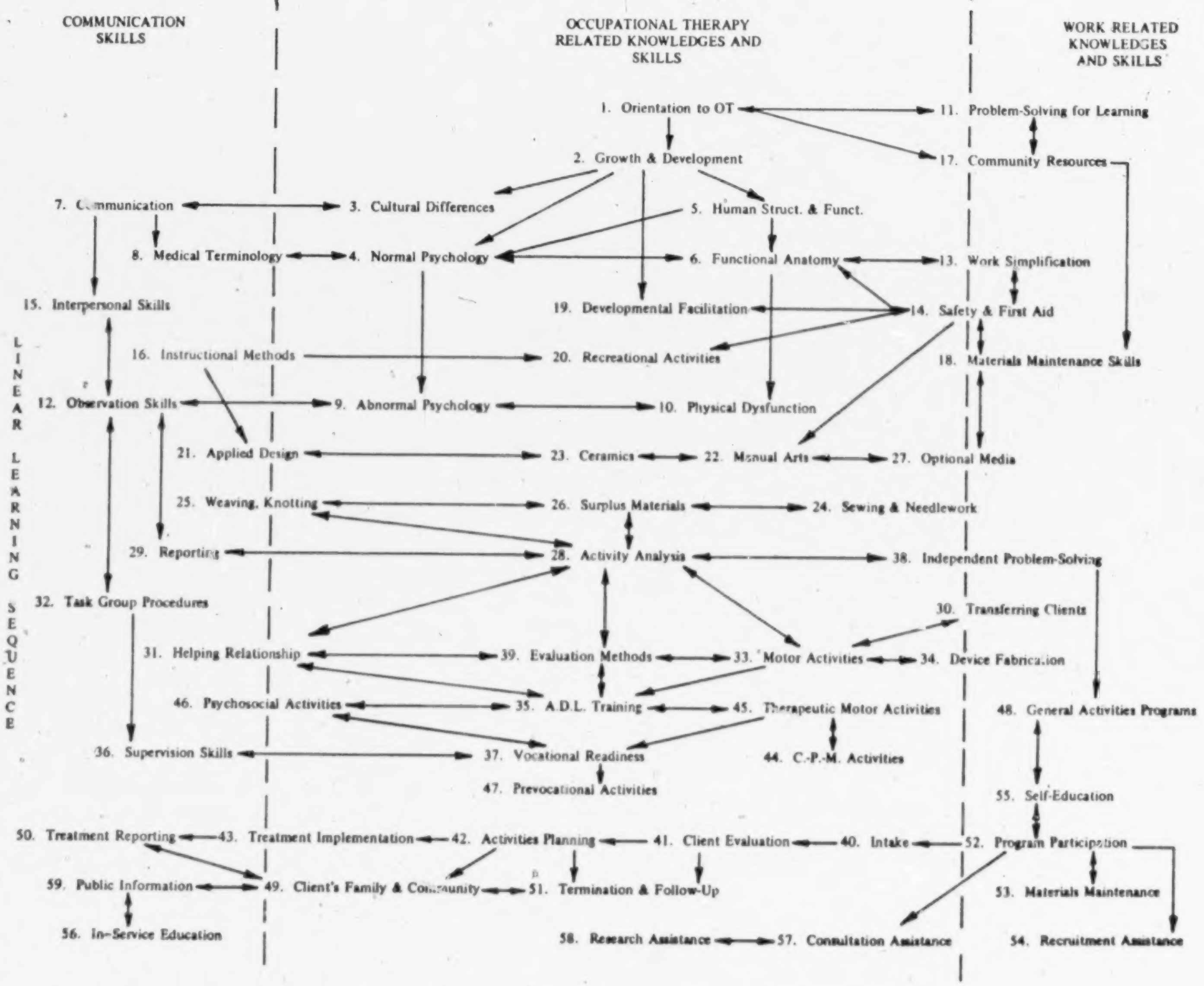
3. Assembly of course work. As a course is assembled, the following processes should take place:

   a. Clarify and specify instructional objectives.
   b. Estimate the amount of time (number of hours, number of credits, etc.) the course should require.
   c. Determine teaching strategies and methods.
   d. Determine teaching media, bibliographical resources, or texts.
   e. Determine evaluation instrument (classroom or laboratory test) to be used.

   Example: Assume that the following two modules are to be combined into a course of instruction:

   Problem Solving Approach to Learning: A method of problem solving to be applied in occupational therapy.

SUGGESTED LEARNING SEQUENCE
PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN


COMMUNICATION SKILLS
OCCUPATIONAL THERAPY RELATED KNOWLEDGES AND SKILLS
WORK RELATED KNOWLEDGES AND SKILLS
LINEAR LEARNING SEQUENCE
1. Orientation to OT
2. Growth & Development
3. Cultural Differences
4. Normal Psychology
5. Human Struct. & Funct.
6. Functional Anatomy
7. Communication
8. Medical Terminology
9. Abnormal Psychology
10. Physical Dysfunction
11. Problem-Solving for Learning
12. Observation Skills
13. Work Simplification
14. Safety & First Aid
15. Interpersonal Skills
16. Instructional Methods
17. Community Resources
18. Materials Maintenance Skills
19. Developmental Facilitation
20. Recreational Activities
21. Applied Design
22. Manual Arts
23. Ceramics
24. Sewing & Needlework
25. Weaving, Knotting
26. Surplus Materials
27. Optional Media
28. Activity Analysis
29. Reporting
30. Transferring Clients
31. Helping Relationship
32. Task Group Procedures
33. Motor Activities
34. Device Fabrication
35. A.D.L. Training
36. Supervision Skills
37. Vocational Readiness
38. Independent Problem-Solving
39. Evaluation Methods
40. Intake
41. Client Evaluation
42. Activities Planning
43. Treatment Implementation
44. C.-P.-M. Activities
45. Therapeutic Motor Activities
46. Psychosocial Activities
47. Prevocational Activities
48. General Activities Programs
49. Client's Family & Community
50. Treatment Reporting
51. Termination & Follow-Up
52. Program Participation
53. Materials Maintenance
54. Recruitment Assistance
55. Self-Education
56. In-Service Education
57. Consultation Assistance
58. Research Assistance
59. Public Information

Community and Institutional Resources: *Places and people from whom pertinent information needed in occupational therapy can be found.*

a. Clarify and specify instructional objectives: The following are the overall performance objectives as specified in the curriculum guide:

Problem Solving Approach to Learning: *To identify and interpret problem solving techniques and relate their application to tasks.*

Community and Institutional Resources: *1) To identify a variety of community or institutional resources, 2) to describe the types and purposes of these resources, and 3) to compile required data from given resources.*

If it is determined that all of the above objectives are an essential part of the course, then each objective should be clarified to specify:

1) who should do the activity (audience),
2) what should be done (behavior),
3) under what circumstances (conditions),
4) how well or completely (degree)?

For example, for the "Community and Institutional Resources" module above, overall objective #1 could be restated to read:

> Given the task of identifying a variety of community or institutional resources (condition), the learner (audience) will apply a problem solving method (behavior) to identify and describe at least 10 (degree) agencies within the community which provide service to physically or psychosocially disabled individuals.

> Determination of precise behavioral objectives is a difficult task. Some assistance may be found by selecting behaviors from the suggested objective in each module.

Some educators feel that precise behavioral objectives are limiting to the learner. At any rate, both teacher and learner should know what the learning goals are in any given course.

Clarification of objectives will also point out the need for related learning. In the above example, the learner will need either prior or simultaneous learning in occupational therapy principles.

To provide both a guide for writing behavioral objectives and the context in which the suggested objectives in each module were written, a list of verbs adapted from the Taxonomy of Educational Objectives, Handbook I: The Cognitive Domain, edited by Benjamin Bloom is presented on page 106.

b. Estimate the amount of time the course will require. At this point, some estimation of how much time is involved for the "average" learner must be made, in order to make related decisions concerning scheduling and sequencing.

c. Determine teaching strategies and methods. Assistance in this task may be found in Appendix A of this manual. For the above example, a student independent strategy might be used for student search of community resources.

d. Determine teaching media and resources. Assistance in this task may be found in Appendix C of this manual. The guide user can find additional information about the subject area for his own preparation or decide that the resources are appropriate for student use to gather relevant information.

e. Determine evaluation instrument. Assistance in this task may be found in Appendix B of this manual. In the above example the use of a list or essay report can provide the instructor with evidence of completion of the required number of descriptions. It must be noted that the above example is not written to include the format, length, or amount of detail in each description. If the instructor wishes to evaluate those items, a description of his expectations should be included in the objective.

4. Affective Applications to Learning Occupational Therapy Technician Tasks: The affective objectives noted below are related to task performance of the occupational therapy technician in a clinical application setting,

A CLASSIFICATION OF VERBS RELATED TO A COGNITIVE TAXONOMY

Knowledge - emphasis on recall, specific or universals.

VERBS:

choose
define
identify
review
survey
read
indicate
answer question
label
list
locate
match
select
copy
complete a word, phrase, or statement
record
confer (to gain information)
review (to obtain facts)

Comprehension - emphasis on grasp of meaning, intent, relationships, in oral, written, graphic, non-verbal communication.

VERBS:

classify
describe
estimate
expand
explain
express
interpret
measure
recognize
suggest
summarize
trace
convert
compare the importance of
put in order
compute
review to explain

Application - emphasis on applying appropriate principles or generalizations.

VERBS:

arrange
apply
calculate
construct
make
draw
demonstrate
differentiate
discuss
implement
coordinate (activities)
use information, tools
collect information
keep records
perform activity
plan activity
prepare
present
solve
compile data
schedule
administer test

Analysis - emphasis on breakdown into constitutent parts and of the way they are organized.

VERBS:

analyze
debate
determine
differentiate
review to analyze
form generalizations
deduce
draw conclusions
make inferences
organize
interpret relationships

Synthesis - emphasis is on putting elements or parts to form a whole.

VERBS:

combine and organize
design
develop
coordinate (program design)
produce
write (original)
plan program

Evaluation - emphasis is on values, making qualitative or quantitative judgments with criteria from internal or external sources and with standards.

VERBS:

make a decision
evaluate
compare (and contrast)

but it is assumed that the listed affects will be learned throughout the learner's educational program. As the educator plans curriculum he should attempt to integrate affective learning with cognitive and psychomotor learning. Therefore, although the following objectives relate to clinical application, related affective objectives must also be included during the learning of basic information and information-application modules. Their placement and composition depends upon learning sequence, module clustering, and the value system of each individual learner.

The affective objectives are structured as follows:

1. *Title and definition of affective application. Both of these items are extrapolated from:* Krathwohl, David R.; Bloom, Benjamin S.; and Masia, Bertram B. Taxonomy of Educational Objectives, Handbook II: The Affective Domain. New York: David McKay Company, 1964.
2. *Overall Performance Objective: This item is an explanation of how the affect relates to occupational therapy task performance.*
3. *Suggested Questions Concerning Learner Performance: These items are stated as questions to suggest means by which the teacher and the learner may infer satisfactory task performance. They are not definitive. Many alternative questions are possible.*

Following are a list of affective performance objectives extrapolated from a questionnaire sent to occupational therapy practitioners and educators:

Affective Applications for the Occupational Therapy Technician

a. Affective Application: Awareness: "learner sensitization to the existence of certain phenomena and stimuli; that is, that he be willing to receive or attend to them".

Overall Performance Objective: The learner will demonstrate an awareness of behaviors and events in:

- gathering information about pertinent client intake data in terms of client background and medical problem;
- testing client abilities by conducting assigned tests or evaluation checklists and in recording test results;
- treating or training client according to devised plan by applying and adapting plan, conferring with staff, and modifying activity to meet therapy goals;
- guiding and encouraging children and clients demonstrating developmental or perceptual-motor lags and psychosocial dysfunction;
- organizing and implementing a general recreational and arts and crafts programs;
- training client on a prevocational basis as directed;
- recommending termination of services and assisting in formulating client's discharge plans and continuation of treatment goals;
- gathering information for personnel recruitment;
- orienting and training assigned staff, volunteers, and conference or workshop groups;
- promoting overall establishment and occupational therapy services to lay groups as directed.

Suggested questions concerning learner performance:

1. How does the learner appear to pay attention and describe what he sees?
2. How does the learner attend to multiple stimuli?
3. How does the learner express willingness to observe carefully the behavior or motor activity of clients?

4. How does the learner express interest in the client when he talks with him?
5. How does the learner express interest in the duties, tasks, and skills of his co-workers?
6. How does the learner appear to notice moods of others?

b. Affective Application: Willingness to Receive: behavior which "involves a neutrality or suspended judgment toward a stimulus and where attention of a phenomenon occurs".

Overall Performance Goal: The learner will display an acceptance of client values and behaviors in:
informing, instructing, and conferring with client's relatives, guardians, and other health care workers in home, community, or establishment setting.

Suggested questions concerning learner performance:

1. How does the learner listen to what others are saying and demonstrate awareness of non-verbal behavioral cues?
2. How does the learner use non-verbal facial expressions or body movement to express acceptance of the client?
3. Does the learner ask questions of another to ascertain their background, interests, etc.?
4. Does the learner avoid making value judgments concerning the client's personal ethical, moral, or religious value system?
5. How does the learner separate his personal feelings concerning client behavior from objective reporting of behavior?
6. How does the learner maintain neutrality of affect when confronted with hostile or acting out behavior?
7. How does the learner express a willingness to include the client and his family and other workers as much as possible in planning his therapeutic programs?
8. How does the learner express willingness to adjust his language to adapt to the level of comprehension of the client and his family?

9. How does the learner express a desire to adjust his instructional or teaching methods to the level of client and family comprehension?

c. Affective Application: Willingness to Receive: behavior which "involves a neutrality or suspended judgment toward a stimulus and where attention of a phenomenon occurs".

Overall Performance Goal: The learner will display a sensitivity to client values and behaviors in:

gathering information about pertinent client intake data in terms of background and medical problems;
testing client's abilities by conducting assigned standard tests or evaluation checklists;
planning and arranging activities for client in order to implement treatment plan;
treating or training client according to devised plan by applying and adapting plan, conferring with staff, and modifying activity to meet therapy goals;
guiding behavior of client demonstrating psychosocial dysfunction;
organizing and implementing general recreational and arts and crafts programs;
training client on a prevocational basis as directed;
informing, instructing, and conferring with client's relatives, guardians, or other health care workers in home, community, or establishment setting;
recommending termination of services and assisting in formulating client's discharge plans and continuation of treatment goals.

Suggested questions concerning learner performance:

1. In what way does the learner demonstrate a tolerance for a variety of types of people?
2. How does the learner accept as associates and co-helpers other human beings without regard to race, religion, or national origin in everyday undertakings?

3. How does the learner demonstrate a tolerance of cultural patterns exhibited by individuals for other groups - religious, social, political, economic, national, etc.?
4. How does the learner recognize client's family members as persons with needs and interests of their own?
5. What overt behavior does the learner display to indicate his sensitivity to human needs and problems?
6. How does the learner demonstrate awareness and inclusion of client values in making suggestions concerning client activities?
7. How does the learner justify his suggestions and actions on the basis of client needs?

d. Affective Application: Acquiescence in Responding: "the reaction to a suggestion without resistance or yielding unwillingly".

Overall Performance Objective: The learner will demonstrate a compliance in performing tasks in:
training client on a prevocational basis as directed;
implementing maintenance of equipment, supplies, and materials;
compiling, recording, and conveying data for research projects as directed.

Suggested questions concerning learner performance:

1. How does the learner react when being given orders or directions from an authority? From a peer?
2. How does the learner demonstrate willingness to approach a task for which he has been given directions or orders?
3. How does the learner defend rationally and without undue emotion non-performance or unwillingness to perform assigned tasks?
4. How does the learner assume responsibility for organizing his own tasks without dependence on others for detailed instructions or directions?
5. Does the learner display enthusiasm or indifference at being asked to perform a materials maintenance task? Add another client to his schedule? Collect research data?

e. Affective Application: Willingness to Respond: "the capacity for voluntary action not so much in response to outside prompting as it is a voluntary response from choice".

Overall Performance Objective: The learner will display a willingness to provide service in:

implementing maintenance of materials, supplies, and equipment;
orienting and training assigned staff, students, volunteers, and conference or workshop groups;
collecting data as directed to assist in activities and program planning for consultee agency.

Suggested questions concerning learner performance:

1. Does the learner assume a responsibility for informing co-workers and superiors about maintenance needs?
2. What kind of reaction does the learner display at being asked to perform a service?
3. Does the learner volunteer for committees or groups within the clinical setting which might be able to benefit from his experiences?
4. Does the learner volunteer for extra tasks, committee work, maintenance tasks, or data collection when he has time?
5. How does the learner demonstrate a willingness to perform obviously needed tasks without specific direction?
6. How does the learner demonstrate a willingness to assist co-workers, students, and others in areas in which he has knowledge and skill?

f. Affective Application: Acceptance of a Value: "the emotional acceptance of a proposition or doctrine upon what one implicitely considers adequate ground".

Overall Performance Objective: The learner will display an acceptance of the values of providing service in:

organizing and implementing general recreational and arts and crafts programs;

gathering information for personnel
  recruitment;
promoting overall establishment and
  occupational therapy services to lay
  groups as directed.

Suggested questions concerning learner performance:

1. How does the learner consider the needs and capabilities of the clients when planning general activities programs?
2. Does the learner assume a responsibility for informing outside individuals about occupational therapy?
3. Does the learner display enthusiasm or indifference at being asked to disseminate information about occupational therapy?
4. Does the learner volunteer for committees, groups, or community agencies which might be able to benefit from his services?
5. How does the learner demonstrate his willingness to spend time and effort in discovering and reporting potential employees?
6. How does the learner demonstrate interest in discussing or explaining occupational therapy services?

g. Affective Application: Preference for a Value: "behavior implies not just the acceptance of a value to the point of being willing to be identified with it, but the demonstration of a committment to the value to pursue it, to seek it out, to want it".

Overall Performance Objective: The learner will examine and select values concerning therapeutic activity in:

planning and arranging activities for
  client in order to implement treatment plan;
treating or training client according
  to devised plan;
implementing specific therapeutic motor
  activities, recreational, and arts
  and crafts programs;
promoting overall establishment and
  occupational therapy services to lay
  groups as directed.

Suggested questions concerning learner performance:

1. Does the learner actively seek out others to gain information about their values and perceptions?
2. Does the learner recognize some of his perceptions as being values?
3. How does the learner identify his preference for the therapeutic values (as he perceives them) of a number of therapeutic activities for a given client?
4. How does the learner seek out additional information concerning relative values of a given activity?
5. Does the learner seek out ways and means to implement ideas that he feels are important?
6. How does the learner identify and defend his values concerning therapeutic activity? To his supervisor? Co-workers? Lay groups?
7. How does the learner organize and defend his value priorities when challenged? By his supervisor? Co-workers?
8. How does the learner observe the "confidentiality" of information concerning staff and clients?

h. Affective Application: Commitment: "The conviction or a belief held beyond a shadow of a doubt and the act of furthering the thing valued in some way, to extend the possibility of developing it to deepen involvement with it and things representing it".

Overall Performance Objective: The learner will display a commitment to the values of therapeutic activity in:

promoting overall establishment and occupational therapy services to lay groups as directed.

Suggested questions concerning learner performance:

1. How does the learner demonstrate drive and perseverance in seeking out information related to concepts he values?
2. How does the learner relate concepts he values to his tasks and duties in occupational therapy?
3. How does the learner state or relate values to which he is committed to lay groups?

i. Affective Application: Conceptualization of a Value: "the comparative evaluation of values after it has been demonstrated that a particular value has emerged".

Overall Performance Objective: The learner will form judgments concerning personal responsibilities in:

gathering information for personnel recruitment;
receiving instruction at conferences, seminars, and training sessions;
orienting and training assigned staff, students, volunteers, and conference or workshop groups;
promoting overall establishment and occupational therapy services to lay groups as directed.

Suggested questions concerning learner performance:

1. How does the learner determine priorities of personal responsibility to staff, students, and volunteers?
2. How does the learner demonstrate his personal judgments concerning his involvement in education programs in relation to his other tasks and duties?
3. How does the learner organize and defend his value system concerning personal responsibilities? Related to personnel recruitment? Self-education? In-service education? Public information?

j. Affective Application: Organization of a Value System: "development of a value system to bring together a complex of values, possibly disparate values, and to bring these into an ordered relationship to one another".

Overall Performance Objective: The learner will organize a value system concerning personal responsibilities and therapeutic principles in:

receiving instruction at conferences, seminars, and training sessions;
promoting overall establishment and occupational therapy services to lay groups as directed.

Suggested questions concerning learner performance:

1. How does the learner organize his value system concerning his personal responsibilities in seeking, finding, and using resources to maintain and improve personal knowledge and skill?
2. How does the learner identify the value priorities of therapeutic principles in talking to lay groups about occupational therapy?

k. Affective Application: Development of a Generalized Set: The way an individual "approaches a problem determines what he sees as important in it, delimits the things which he will take into account in attempting to find a solution, and determines the tenacity with which he clings to the initial perception of the problem".

Overall Performance Objective: The learner will demonstrate a readiness to revise judgments and change behavior in light of evidence in:
treating or training client according to devised plan;
exchanging information concerning establishment policies, procedures, and programs to assist in their development;
receiving instruction at conferences, seminars, and training sessions.

Suggested questions concerning learner performance:
1. How does the learner demonstrate a readiness to listen and consider a view point opposite from his own?
2. How does the learner delineate his value commitment priorities when he must defend his point of view?
3. How does the learner demonstrate flexibility in accepting a decision or point of view opposite of his when evidence and discussion have determined an opposite course of action?
4. How does the learner demonstrate willingness to revise, change, or improve his work knowledges and skills after the need to change or improve is evidenced?

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

BASIC INFORMATION MODULE

1. Introduction to Occupational Therapy: Introduction to the profession of occupational therapy, its place in the health care system, and its educational requirements.

Overall Performance Objective: 1) To describe how and why occupational therapy is practiced, 2) to explain how the profession was developed, 3) to describe the relationships between occupational therapy and other health care professions, 4) to discuss and describe ethical and legal responsibilities, 5) to identify and discuss his future role in the health professions.

Related Activities in Occupational Therapy: To know the learning requirements, role, and function for the occupational therapy technician.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list the functions of occupational therapy.	Structured opportunities for clients with psychosocial dysfunction to develop more satisfying social and personal skills.
2. Given a definition of occupational therapy, relate the definition with the functions of occupational therapy and discuss how occupational therapy serves clients in each of the above function.	In restoration of physcial function, occupational therapy evaluates function, communicates the level of function to others, and uses evaluation results to determine activities which will help the client maintain or improve his function.
3. Identify significant events in the history of occupational therapy by tracing the development of the profession from the inception of the name to the present day.	
4. Define the term "rehabilitation".	Philosophy of recovering from disease or handicap by the whole person. Includes return to optimal physical, psychosocial, and vocational function.

5.	Define the terms "health care team" and "health care services".	Team: a client-oriented group of specialists who plan a rehabilitation program with client and implement it. Services: rehabilitation tools or assistance provided for client by a number of people with special skills in a variety of agencies.
6.	Identify and describe the functions of a given list of health care disciplines.	Physician, nurse, psychiatrist, physical therapist, social worker, administrator, etc.
7.	Explore and discuss his perceptions of relationships between other health care disciplines and occupational therapy.	The need for coordinated communication, etc., between medical, educational, and vocational services.
8.	Identify the job functions of the occupational therapy technician and differentiate between the technician role and those of the aide, therapist, and consultant.	Technician implements treatment, therapist plans and directs treatment, and the aide assists in treatment. The consultant formulates research design and methodology and provides professional advice [illegible] those agencies desiring help or improvement.
9.	Define a given list of terms frequently used to delineate the credentialing and status of health care professions.	Titles: aide, technician, therapist. Credentialing: registration, certification, licensure. Status: professional, paraprofessional, sub-professional, etc.
10.	List standards of ethical behavior practiced by all health care professions.	Confidentiality of client communication, mutual respect for other professions, responsibility for client welfare, etc.
11.	Explore and discuss his perceptions of ethics which should be practiced by all occupational therapy practitioners and describe situations in which ethical behavior	

should be practiced by the occupational therapy technician.	
12. List and describe the types of legal liability and give examples of each.	Types: misfeasance, malfeasance. Examples: misfeasance: not taking "due care"; eg. not using proper safety precautions. malfeasance: intentional or malicious harm to clients such as ignoring complaints of pain, verbal or physical cruelty.
13. Describe the types of legal problems which may occur in occupational therapy practice and discuss means of protecting oneself and the agency from those problems.	Problems: liability suits, non-payment of fees, etc. Protective measures: proper record-keeping, incident reports, liability insurance, doing work properly, not assuming unauthorized responsibilities, etc.
14. Explore and discuss his perceptions of his future role in health care.	Coping with change.
15. Given a copy of the educational program planned for him, discuss his perceptions of the purpose of the program.	Copy of curriculum guide, course descriptions, or objectives.
16. Given a copy of the educational program, identify those performance or knowledges in which he is personally competent and demonstrate his competency by performing specified tasks or by demonstrating comprehension of facts.	Proficiency or performance evaluation.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:

- Multiple Choice, p. B-9
- Matching, p. B-9
- Completion, p. B-10
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:

S: 12, p. C-16
F: 42, P. C-36; 45, p. C-37; 95, p. C-47; 107, p. C-49; 112, p. C-50; 117, p. C-51; 121, p. C-52
References, p. C-74

2. Normal Human Development: Developmental life stages and normal behavior within them.

Overall Performance Objective: 1) To identify, describe, and discuss the continuum of developmental expectations, behaviors, and needs for each developmental phase from birth through death and 2) to discuss causes and results of an interruption in or interference with the developmental process.

Related Activities In Occupational Therapy: To gather appropriate information concerning clients; discuss client's behaviors and capabilities; adapt activities to client capabilities and interests; instruct client in activities; encourage, guide, and facilitate client activities; assist client in modifying behavior; and observe and report client behaviors.

Suggested Objectives:	Examples:
The Learner Should:	
1. Name and describe major components of normal growth and development.	Biogenetic (physical), cognitive-perceptual-motor, social, enculturation, etc.
2. Describe the interdependencies between the identified components.	Social development is dependent on appropriate sensory-motor development; physical development is dependent on social-emotional development, etc.
3. List major developmental life stages and classify each stage according to approximate age and most important developmental life tasks.	Infancy - 0 to 15 mo. - relating to family, walking, etc. Adolescence - 12-18 years - developing social roles, emotional independence, and selecting occupation. Adulthood - 40-60 years - civic and social responsibility, etc. Aged - 60 years-death - adjustment to decreased responsibilities, etc.
4. Within each of the developmental life stages, ages, and tasks identified above, identify and describe the normal developmental expectations for each area of development.	Early childhood (15 mos - 3 yrs.): Sensory motor expectations: gross motor planning, form and space perception, etc.

	Motor expectations: running, balancing, dominance established, etc. Psychosocial expectations: personality, psychodynamic, anal-independent, self-assertive, etc. Group Relationship expectations: parallel play, etc. Cognitive-conceptual expectations: language usage in terms of short sentences, etc. Adaptive: bowel and bladder control, feeding self, etc. Conceptual: counting to 3, drawing circles, etc. Enculturation: family, extended family relationships, acceptance of "rightness and wrongness" of activities.
5. Define the term "play" and relate the meaning of play to the concept of child development.	"Play is a child's work". From play activities evolves all of the child's developmental patterns of learning, loving, finding out who he is, what he can be and do, and making a vocational choice.
6. Define the term "work" and relate when, where, and how vocational exploration, choices, and skills are learned in relation to normal growth and development.	Work is an activity which has a value in contemporary society. It contains psychosocial as well as economic implications. Vocational Exploration - begins in childhood, choices occur in adolescence (with the identity crisis), and skills are learned throughout life.
7. Define the word "recreation" and relate the evolution of play into recreational activities.	Recreation is an activity which provides pleasure in the doing; the product may be or may not be important. The pleasurable aspects of play evolve into recreational activities.
8. Compare and contrast his perceptions of the meaning and value of work and recreation to adults.	Both are needed -- if your work gives pleasure as recreation, you've got it made! There should be a balance between work and leisure.

9. Identify and discuss ways in which the developmental process can be interrupted or retarded.	Birth defects: mental retardation, cerebral palsy, blindness, brain damage, etc. Trauma and disease: crippling, cancers, etc. Environmental deprivation: limited physical and social stimulations, limitations imposed by physical disability (crippling, blindness, deafness), etc.
10. Explain and draw conclusions about the effects of the above physical and environmental deprivation on normal human development.	Developmental retardation: Immature psychosocial development Immature physical development Immature cognitive development Abnormal behavior and retarded functional skills seem bizzarre because they are not age-appropriate; they are immature.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
T: 2 & 3, p. C-5; 4 & 5, p. C-6
PI: 21, p. C-11
F: 3 & 6, p. C-28; 31, p. C-33; 33, 34, & 35, p. C-34; 59 & 60, p. C-40; 84 & 86, p. C-45; 96, p. C-47; 104, p. C-49; 110, p. C-50; 120, p. 52;
References, p. C-74

3. Social, Cultural, and Economic and Ethnic Differences: Differences in behaviors exhibited by various American groups because of social, cultural, ethnic, and economic influences.

Overall Performance Objective: To identify, explore, and discuss socio-cultural, socio-economic and ethnic life styles, attitudes, and differences.

Related Activities in Occupational Therapy: To communicate with staff members, interview clients; make suggestions concerning client activities to staff and client; arrange appropriate activities; inform, instruct, and direct client according to his capabilities; establish rapport with client, encourage and guide client; and assist client in modifying his behavior in accord with his expected environment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define terms relevant to the "culture concept" and discuss the idea of the inter-relatedness of many of the terms.	Socio-economic, socio-cultural, culture, group, sub-culture, ethnic, minority, cultural bias, etc.
2. Given a list of American groups, classify each group as to whether it is a sub-culture, ethnic group, or minority group and discuss why or why not such classifications are appropriate.	Sub-culture: youth, senior citizen, appalacian, etc. Ethnic group: Jewish, Italian, Irish, Chinese, Japanese, WASP, etc. Minority group: Black (Negro), Indian, Chicano (Mexican-American), Puerto Rican, etc.
3. Describe and compare cultural attitudes of each of the above concerning a given list of life activities.	Self-identity, child rearing, vocational choice, attitudes towards society, work vs. recreational needs, etc.
4. Name classifications of socio-economic groups.	Upper, upper-middle, middle-middle, lower-middle, lower, etc.
5. Describe and compare life styles of each.	Relative income, occupational groups, housing, general educational level, etc.

6.	Define the term "stereotype", give examples of commonly used stereotypic statements, and discuss their relative validity.	"Blacks have a natural sense of rhythm", "dumb Pollock", "Wild Indian", "free, white, and twenty-one", "all Italians are Catholic", etc.
7.	Identify and discuss common economic, social, and attitudinal conflicts prevalent in a given list of ethnic or socio-economic groups.	Black vs. White, middle vs. welfare class, youth vs. "the establishment", etc.
8.	Explore and identify his perceptions of his personal ethnic and socio-economic life style and attitudes and analyze his own cultural biases and their perceived effects on the attitudes of others.	Suspicious of those not like us, etc.
9.	Explore and discuss the effects of other individuals' perceived cultural biases upon his own behavior.	Suspicions of others often interfere with communication, etc.
10.	Identify the components of: family, family unit, and extended family.	Family: Parents and their children. Family unit: Primary, closely-related family members. Extended family: Secondary members such as godparents and primary family members.
11.	Identify, describe, and discuss the influence of the family on individuals' behaviors at each life stage.	Childhood: primary influence. Adolescence: ambivalence between family and peer pressures. Adulthood: community and peer pressures. Aging: family influence very strong -- role reversed between parent and childhood.
12.	Explore and discuss the influence of culture on family life and the family's influence on culture.	There are only two universal taboos: incest, matricide and patricide. Why is this? How is the family changing? What influences did your family have on your values? What influence will your clients' families have on clients?

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group p. A-6

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-75

4. Normal Human Psychology: Overview of normal human behaviors and experiences in response to changes in the environment.

Overall Performance Objective: To identify, define and describe normal human behavior as it relates to instinct, emotion, mental processes, intelligence, and personality.

Related Activities in Occupational Therapy: To observe and comprehend personal behaviorial reactions; observe, report, and discuss client behavior; plan appropriate activities according to treatment goals; instruct, demonstrate and explain activities; facilitate and stimulate client's interpersonal-social skills; encourage and support client; and gain information and feeling for client's problems.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "psychology" and "psychiatry" and explain the difference between these terms.	Psychology: the study of normal human behaviors and experiences in response to changes in the environment. Psychiatry: the study, diagnosis, care, and treatment of individuals who respond in an abnormal way to the environment; a medical specialty.
2. Define the term "instinct" and describe ways in which instinct may be evidenced in humans.	Instinct: behavior determined by an innate mechanism; may be seen in human behavior as drives, i.e., hunger, sexual, etc.
3. Identify and describe stimulus-response mechanisms related to behavioralist theory and describe how they occur in human beings.	Approach-approach, approach-avoidance, avoidance-avoidance, conflict, ambivalence, etc.
4. Define the term "emotion" and describe in his own words common emotions displayed by most human beings.	Love, fear, hate, joy.
5. Differentiate between several levels of intensity of a given number of emotions.	Liking, affection, love, etc. Disliking, hate, rage, etc.

6.	Describe the role of stimulus in human emotional responses; particularly in fear and anxiety.	May be response to obvious danger and may be unconscious emotional response.
7.	Define the term "thinking" and describe characteristics of thinking.	Use of symbols, concept formation, concrete and abstract concepts, problem solving, reasoning, etc.
8.	Define the term "learning" and describe given characteristics of learning.	Innate skills, trial and error learning, incentive, association, generalization, reflex, conditioned reflex, reinforcement, positive and negative reinforcement, etc.
9.	Define the term "remembering" and describe factors which enhance or inhibit remembering.	Spaced practice, massed practice, whole and part memorization, active and passive memorization, the effect of use in forgetting, meaningfulness, etc.
10.	Define the term "perception" and list normal human sensory input system.	Perception: meaningful organization of sensation. Sensory input: vision, hearing, smell, position sense, pain, heat, etc.
11.	Describe how perception can be altered.	Previous experiences, perceptual set, etc.
12.	For each sensory input system, describe the sensations elicited and explain how various sensations combine to provide perceptual information.	Vision: depth perception, color, brightness, hue, spacial relationships, etc. Hearing: sound, directionality, etc. Combinations: the perception of equilibrium is achieved through the balance mechanism, in the ear, position sense receptors, etc.
13.	Define in his own words terms related to intelligence.	"Intelligence", "intelligence test", "I.Q.", etc.
14.	Discuss and explore the benefits and weaknesses of I.Q. testing.	Do I.Q.'s predict success in school? At work? Do I.Q.'s determine a person's creativity?

15. Describe the processes of mental development.	Differentiation, integration, maturation, learning.
16. Describe the basic structure and function of the brain and describe how each area. relates to human behavior.	Cortex Cerebellum Mid Brain Brain Stem
17. Name the stages of personality development and describe important factors of personality developed during each stage.	Infancy, childhood, etc. Oedipal conflict, moral sense development, identification, independence, intellectualizing, social awareness, etc.
18. List and describe the mental mechanisms and give examples of each in normal human situations.	Phantasy, compensation, rationalization, insulation, projection, reaction formation, identification, etc.
19. List and describe given personality types and give examples of behavior typical of each.	Authoritive, dependent, agressive, etc.
20. Define the term "attitude" in his own words, give examples of attitudes, and explain how attitudes influence behavior.	Examples: helpful, negative, protective, democratic, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-76

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

BASIC INFORMATION MODULE

5. Normal Human Structure and Function: Basic structures and systems of the human body and the interrelationship between systemic function.

Overall Performance Objective: 1) To identify the basic structural organization of the human body, 2) to apply accepted anatomical terminology and identify the basic organ systems of the body, and 3) to indicate the normal overall functions of each structure and system and explain the primary interrelationships between systemic functions.

Related Activities in Occupational Therapy: To read and study texts, periodicals, and manuals related to human pathology; comprehend functional anatomy; gather relevant information concerning client; instruct client in activity; observe and report client's physical condition; and adjust or modify treatment, modify self-help, or modify assistive devices as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and define the basic structural organization of the body.	Cell, tissue, organ, etc.
2. Describe the interrelationships between the above.	Tissue is a group of specialized cells and an organ is a group of specialized tissues to perform a given function.
3. Define commonly used terms to indicate position or location.	Superior, inferior, anterior, posterior, ventral, dorsal, etc.
4. Identify body planes.	Longitudinal, horizontal, vertical, etc.
5. Identify body cavities.	Thoracic, peritoneal, etc.
6. Identify body sections.	Sagital, frontal, etc.
7. Identify and name types of tissue.	Epithelial, bone, muscle, nervous, etc.
8. Explain normal tissue functions.	Epithelial: organ covering. Bone: body support. Muscle: contracts for motion.

9.	Name every major body organ.	Heart, lung, kidney, etc.
10.	State what functions each organ has by itself.	Heart pumps blood; kidney cleans blood; etc.
11.	Define the term "system" as it relates to human body function.	System: a group of organs or organ parts concerned with a body function.
12.	Identify each major organ system of the body.	Cardio-vascular, gastro-intestinal, gastro-urinary, etc.
13.	Identify the major organs involved in each system.	Cardio-vascular: heart, veins, etc.
14.	State approximately where each organ is located in the body (see above), and what its physical characteristics are.	Size, shape, contour, etc.
15.	State what each organ does within a given system.	
16.	State how each organ function is dependent upon other organs within that system.	
17.	Recognize the relationships between organ systems.	Control of the cardio-vascular system by the nervous system. The interrelations between the cardio-vascular system and the digestive system. The sharing of organs and tissues between cardio-vascular and genital-urinary systems, etc.
18.	Recognize the relationship of organ systems and normal human function.	Movement cannot occur without bones for support, muscles for power, and nerves for stimulus and control. Body temperature cannot be maintained without the cardio-vascular system, the skin, and autonomic nervous system, etc.

Suggested Teaching Strategy:
  Teacher-Student Group, p. A-6
Suggested Evaluation:
  Multiple Choice, p. B-9
  Matching, p. B-9
  List, p. B-11
Suggested Resources:
  References, p. C-76

6. Functional Anatomy: Relationships of neuromuscular and skeletal functions to body motion.

Overall Performance Objective: 1) To identify and relate body movement to structure, function, and interrelationships of skeletal muscle and nervous system, 2) to identify all motions of extremities, neck, and torso, and 3) to define and classify postures and positions of the human body.

Related Activities in Occupational Therapy: To gather relevant information concerning client's physical independence; exchange relevant information with staff; observe and report client's physical activity or use of devices; plan activities according to directions; demonstrate or guide client in therapeutic motor activities; suggest activity change or substitutes motions; and implement activity changes.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and name, using appropriate terminology:	
a) all major long bones of the body.	Femur, humerus, etc.
b) major small bone groups.	Carpals, metacarpals, etc.
c) large bone groups which protect and contain vital organs.	Pelvis, rib cage, skull, etc.
2. State the location, general structure and function of each of the above skeletal groups.	
3. Identify the two types of moveable joints and give examples of each.	Semi-moveable: vertebral joints, etc. Freely moving: elbow, etc.
4. Identify the major types of freely moving joints and give examples of each.	Hinge: elbow, knee, etc. Gliding: radio-ulnar, wrist, etc. Pivot: neck, etc. Ball and socket: hip, shoulder, etc. Saddle: thumb, etc.
5. State the kinds of motion each will allow.	Hinge: open and close, forward and back, etc. Pivot: rotary motion, etc.

6.	Name and identify all moveable joints in the body.	Wrist, elbow, knee, ankle, proximal-interphelangeal, etc.
7.	Name and define major motions possible at the major joints.	Flexion, extension, hypertension of fingers, radial and ulnar derivation at wrist, supination, pronation at radial-ulnar joint, etc.
8.	Given a list of moveable joints match appropriate joints with appropriate motion(s).	
9.	Recognize and state the differences between gross (power) and precision grasp.	Power: using whole hand to hold or grasp. Precision: manipulation of small objects.
10.	Define and demonstrate "functional position" of the hand.	Efficient grasp requires slight hypertension.
11.	Classify given major body muscle groups by function, general name, and location.	The muscle group which flexes the elbow: located over the anterior part of the upper arm. The most important forearm flexors are the biceps muscles. The opposite action of forearm flexion is extention. The triceps group is the most important extensor of the elbow and is located over the posterior part of the upper arm.
12.	Describe the general classification of parts of the nervous system involved in receiving, transmitting, and sending stimuli for motion.	Sense organs, brain, spinal cord, spinal and peripheral nerves, etc.
13.	Identify differences between sensory and motor neurons.	
14.	Identify the major sensory organs of the human body.	Hearing, balance, vision, smell, taste, tactile, etc.
15.	Identify perceptions common to human awareness.	Position in space, heat pressure, pain, distance, etc.

16.	Given a list of the basic sensory organs, match appropriate organs to appropriate perceptions.	Position in space: proprioceptor organ on balance. Heat: sense organs in the skin. Pressure: pressure receptors in the joints. Distance: binocular vision, etc.
17.	Explain basic interrelationships between motor activities and perception.	"Ducking" a baseball requires vision, depth perception, position in space, etc.
18.	Explain the difference between reflexive response and a learned response and give examples of each.	Reflexive: not under voluntary control. Learned: under voluntary control. Examples: Reflexive: withdrawal from heat. Learned: walking.
19.	Describe the effects of practice on given motions.	Walking: learned and practiced in infancy, performed without conscious thought as an adult.

Suggested Teaching Strategy:
- Student Independent, p. A-8
- Direct Communication, p. A-5

Suggested Evaluation:
- Multiple Choice, p. B-9
- Matching, p. B-9
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- T: 1, p. C-5
- PI: 4, p. C-8
- F: 36, p. C-35; 51, p. C-39; 64, p. C-42
- References, p. C-76

7. Communication: Behaviors necessary for communicating with or relating to individuals and groups.

Overall Performance Objective: To identify, define, and apply non-verbal and verbal techniques of communication.

Related Activities in Occupational Therapy: To interview clients; inform client of program; explain and demonstrate activities; instruct and direct client; guide, encourage and influence client in participatation; obtain information concerning client or program; exchange information: receive advice, direction, or assistance; discuss client or program; make suggestions concerning program or client; report client status; and instruct staff or others in specific techniques.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify non-verbal communication behavior cues and suggest the meaning of each as it relates to human feelings or emotions.	Facial expressions to indicate surprise, anger, interest, etc. "Body language" to indicate interest, attack, disinterest, etc.
2. Demonstrate the above in his own behavior in listening or speaking.	
3. Identify ways to listen and receive information and apply them to a given situation.	Methods: Giving full attention Taking notes Asking questions Avoiding value judgments
4. Demonstrate his ability to hear and extrapolate information in a given situation.	Listening to a lecture, taking notes, reporting the most essential points, etc.
5. Given a verbal list of instructions in a series of three, five, seven, and nine steps or units, mentally organize these into units and either report or perform the directions.	Directions for going some place, directions for drawing an unseen figure, etc.

6. Identify a method of giving directions and apply this method in a given situation.	Identifying key steps and breaking activity into small steps, speaking to another individual in terms he can understand, using body language, checking to be sure the individual understands, etc.
7. Describe and identify behaviors apparent in verbal and non-verbal reinforcement and encouragement.	Verbal encouragement: "that's good", "right", "almost right", etc. Non-Verbal encouragement: smiles, head nods, attentive behavior, etc.
8. Define the term "persuasion" and state some techniques which can be used to influence.	Reinforcement, encouragement, telling an individual of the positive benefits of a given activity, being personally enthusiastic about an activity, etc.
9. Describe and identify behaviors involved in interviewing to obtain information and use these behaviors in a given interviewing session.	Showing interest, silent waiting, asking open-ended questions, reflecting statements, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
PI: 16, p. C-10
F: 23-Part V, p. C-32; 24, p. C-32; 63, p. C-42; 97, p. C-47
References, p. C-77

8. Medical Terminology: Terms and phrases related to physical and psychosocial problems and treatment of clients commonly seen in occupational therapy services.

Overall Performance Objective: 1) To identify resources for definitions of medical terms and 2) to identify and translate commonly used prefixes, suffixes, root words, adjectives, and medical abbreviations.

Related Activities in Occupational Therapy: To gather and exchange information concerning client; observe and report treatment; and comprehend materials and texts related to health care.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify commonly available resources which explain or define medical terminology.	Medical dictionaries, medical terminology instruction manuals, medical abbreviation dictionaries, word lists, etc.
2. Define and correctly spell a list of Latin and Greek root words commonly used in health care situations.	plegia = paralysis paresis = partial paralysis or weakness phobia = fear ego = I
3. Define and correctly spell a list of Latin and Greek suffixes commonly used in health care situations.	itis = inflamation of phelia = disease of otomy = removal or cutting into ostomy = removal of part of oma = malignancy of
4. Define and correctly spell a given list of Latin and Greek prefixes commonly used in the health care situations.	a or ab - without or away from ad = to anti = against or before di = two pre = before
5. Define and correctly spell a list of Latin or Greek adjectives commonly used in health care situations.	proximal = near septic = containing bacteria ventral = front micro = small macro = large

6. Given a list of medical terms which combine Latin or Greek prefixes, root words, and suffixes, translate them into English.	hemiplegia = paralysis of half tracheotomy = cutting into the trachea.
7. Given a list of English meanings, construct the appropriate Latin or Greek term.	death of tissue = necrosis inflammation of the joint = arthritis
8. Given a list of commonly used medical abbreviations, state their English meaning.	QID = 4 times a day PRN = as needed NPO = nothing by mouth

Suggested Teaching Strategy:
Student Independent, p. A-8
Direct Communication, p. A-5

Suggested Evaluation:
Matching, p. B-9
List, p. B-11

Suggested Resources:
PI: 24, p. C-12; 34, p. C-14
References, p. C-77

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

BASIC INFORMATION MODULE:

9. Abnormal Psychology: An overview of behaviors exhibited by clients with psychosocial problems.

Overall Performance Objective: 1) To identify the categories of psychosocial dysfunction and 2) to classify and describe behavioral characteristics and overall treatment rationale of a given list of symptom complexes.

Related Activities in Occupational Therapy: To comprehend client records; gather appropriate data concerning client; observe, discuss and report client function; arrange activities according to treatment plan; guide, instruct, or assist client in activities; and facilitate client interpersonal skills and behavior modification.

Suggested Objectives:	Examples:
The Learner Should:	
1. Discuss and describe his perceptions of normal behavior and give examples.	Intellectual, affective, social, cultural, etc.
2. Identify his perceptions of deviant behavior and give examples.	
3. Identify and list the symptoms of abnormal behavior.	Disordered Sensation and Perception, disordered intelligence and thought, disordered affect, disordered motivation, disordered verbal and motor behavior, etc.
4. Describe the basic behavioral characteristics of the above dysfunctions.	Disordered affect: affect increased or decreased in intensity and variability, conflicting or inappropriate affects, etc.
5. Identify and list the classifications of psychiatric disorders based primarily on symptoms and on established causation.	Organic Brain Disorders: acute and chronic. Functional Disorders: psychotic, psycho-physiologic, psychoneurotic, autonomic, and visceral disorders. Mental Deficiency: congenital, defective intelligence.
6. Describe the symptom complexes commonly seen in the above disorders.	Psychotic disorders: distortion of reality, distortions of perception, personality disorganization, regression, etc.

	Psychophysiologic disorders: disorders of bodily function associated with emotional distress such as asthma, peptic ulcer, etc. Psychoneurotic disorders: consciously experiences anxiety, unconscious attempt to control anxiety by defense mechanisms, etc.
7. Recognize defense mechanisms which operate in the normal individual and describe how they are used by normal people in daily life.	Rationalization, sublimation, projection, etc.
8. Identify the defense mechanisms operating in a given number of symptom complexes or clinical conditions and describe how a given number of defense mechanisms are used by clients to a pathological degree.	Introjection: displacement of feelings towards others to oneself, e.g., anger turned inward to self-punishment.
9. List and describe overall treatment techniques commonly used in the treatment of psychosocial dysfunction and relate previously identified symptoms or conditions for which they are often used.	Behavior therapies: reinforcement techniques. Organic therapies: psychopharmacholgy, EST. Talking therapies: psychoanalysis, non-directive, directive. Group therapies: psychoanalytic, transactional, dynamic.
10. Given a list of psychodynamic stages usually evident in a dying client, identify common client behaviors exhibited in each stage and identify and discuss come commonly used constructive ways to help the dying patient.	Denial: refusal to believe in or bargaining with God. Depression: grief, withdrawal. Acceptance: preparation for death. Methods: waiting calmly, communicating with family, putting affairs in order, listening, accepting family feelings, talking about death (if family chooses to), etc.

Suggested Teaching Strategy:

Direct Communication, p. A-5
Teacher-Student Group, p. A-6

Suggested Evaluation:

Matching, p. B-9
List, p. B-11
Observation, p. B-12

Suggested Resources:

VT: 17, p. C-21

F: 30, p. C-33; 32, p. C-34; 55 & 56, p. C-39; 75, p. C-45; 104, p. C-51

References, p. C-78

10. Physical Dysfunction: Physical disease processes, pathologies, or disabilities commonly seen in occupational therapy and treatment implications of each.

Overall Performance Objective: 1) To define a given list of physical disease processes, pathologies, or disabilities commonly seen in occupational therapy and 2) to describe important symptoms, general cause or source of dysfunction, its course or prognosis, overall treatment implications, and considerations.

Related Activities in Occupational Therapy: To comprehend client records; gather appropriate data concerning client; observe, discuss and report client function; plan activities according to treatment plan; and guide, instruct, or assist client in treatment activities.

Suggested Objectives:	Examples:
The Learner Should: 1. List the causes of disease, give examples of each, and describe how each agent can cause dysfunction of normal function.	Causes of disease: Trauma: fractures, wounds. Infections: bacterial and viral. Physical Agents: burns. Chemical Poisons: lye, acid. Anoxia: suffication, drowning. Stress: emotional, physical. Deficiencies: vitamins, minerals, nourishment. Drugs: narcotics. Heredity: allergies, deformities.
2. Define a given list of general medical conditions commonly seen in an occupational therapy setting and describe important symptoms, general cause, course or prognosis, overall medical treatment implications, and precautions for working with such clients.	General Medical Conditions: Heart: Rheumatic Heart Disease Bacterial Endocarditis Coronary Artery Occlusion Hypertensive Heart Disease Congenital Heart Diseases Chronic Valvular Disease Blood Vessels: Arteriosclerosis Arterial Hypertension Arthritis Aneurysms Lungs: Common Cold Bronchitis

  - Bronchiectasis
  - Bronchial Asthma
  - Emphysema
  - Pneumonia
  - Tuberculosis
  - Dust Diseases
  - Lung Cancer
  - Pleurisy
  - Pneumothorax
- Upper Digestive Tract:
  - Cancers
  - Ulcers
- Lower Digestive Tract:
  - Dysentery
  - Ulcerative Collitia
  - Enteritis
  - Intestinal Diverticula
  - Nulabsorption Symdromes
  - Cancers
  - Intussusception
- Liver and Gall Bladder:
  - Hepatitis
  - Cirrhosis
  - Tumors
- Pancreas:
  - Diabetes
  - Tumors
  - Cystic Fibrosis
- Genitourinary:
  - Nephritis
  - Nephrosis
  - Renal Transplantation
  - Congenital Kidney Malfunctions
- Breast:
  - Cancers
- Endocrine System:
  - Pituitarisms
  - Addison's Disease
  - Cushing's Syndrome
  - Goiter
  - Thyroidisms
  - Tumors
- Blood and Lymph Nodes:
  - Anemias
  - Polycythemia
  - Bleeding Diseases
  - Leukemias
  - Mononucleosis
  - Lymphosarcoma
  - Hodgkin's Disease
  - Tuberculosis

		Examples: Leukemia: Definition: rare blood disease, cancer of the while blood cell forming organs. Important symptoms: anemia, weakness, fatigue ability, anxiety concerning outcome of disease. General Cause: largely unknown. It is a form of cancer. Course or prognosis: eventually fatal, recent drugs have proved useful in certain types of leukemia and have prolonged life for several years. Treatment implications: drugs, frequent transfusions of packed red blood cells. Precautions: easily fatigued, easily bruised, susceptible to infection, high level of anxiety concerning illness. Cardio-vascular problems. Respiratory Disease.
3.	Identify surgical problems frequently seen in occupational therapy.	Organ transplants: kidney, etc. Removal of an organ or organ part: gastric resection, gall bladder, etc. Prosthetic implant: pacemaker insert, hip joint, etc. Plastic surgery: skin graft, etc.
4.	Identify the major problems that require surgical intervention and are frequently seen in occupational therapy.	Kidney transplant: Before surgery: dependent upon mechanical kidney. Procedure: removal of client's kidney and replacement of living kidney from live donor. or after recently expired donor. After surgery: use of drugs and possibly radiology to avoid rejection of kidney. Bed rest initially.
5.	Identify the major classifications of neurological problems most commonly seen in occupational therapy services and give examples of each.	Strokes Meningeal Hemorrage Skull Fractures Brain Abscesses Viral Diseases: Encephalitis, Meningitis

	Multiple Sclerosis Parkinson's Disease Intracranial Tumors Seizure Disorders Spinal Cord Dysfunction Cerebral Palsy Perceptive Disorders Mental Retardation
6. Define a given list of neurological conditions and describe important symptoms, general cause, course or prognosis, overall medical treatment implications, and considerations for working with such clients.	Meningitis: inflammation of the covering of the brain and spinal cord. Symptoms: headaches, irritibility, high fever, may be comatose, etc. Course: with treatment of the infection, cure may be complete. If nervous system is permanently distroyed, residual damage will result. (May be blind, deaf, poorly coordinated, altered perception, etc.) Without treatment, morbidity is high. Medical treatment: isolate and treat infection, treat symptoms. Considerations: during active infection state, occupational therapy probably not indicated. During recovery state, fatigue, short attention span, etc.
7. Describe qualities of abnormal body motion commonly seen in occupational therapy.	Incoordination of two or four extremities, eye-hand, tremor, spasticity, rigidity, facidity, etc.
8. Describe pathological reflexes commonly seen in occupational therapy.	"Extensor thrust", "reverse swallowing", etc.
9. Under given orthopedic problems, list orthopedic conditions most commonly seen in occupational therapy and considerations for working with each.	Locomotor System: Fractures Amputations Arthritis Rheumatoid Arthritis Muscular Dystrophies

Suggested Teaching Strategy:
- Direct Communication, p. A-5
- Student Independent, p. A-8

Suggested Evaluation:
- Matching, p. B-9
- Completion, p. B-10
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- VT: 1, p. C-18
- F: 79, p. C-44; 89, p. C-46

11. Problem Solving Approach to Learning: A method of problem solving to be applied in occupational therapy.

Overall Performance Objective: To identify and interpret problem solving techniques and relate their application to tasks.

Related Activities in Occupational Therapy: To gather information; plan effective use of time; determine instructional methods; arrange, implement, and adapt activities; apply behavior reinforcement or modification techniques; and determine appropriate safety techniques.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a problem solving method, list situations where each step can be applied.	Identification of the problem. Determination of alternatives and resources. Selection of solution. Performance of solution. Evaluation of solution and presentation of results.
2. Given the problem of finding the resources for learning about a given aspect of occupational therapy, apply the problem solving method to find the resources, seek out the information, and discuss what he has found.	History of occupational therapy. What is rehabilitation, functions of occupational therapy, etc?
3. Given the problem of planning for efficient use of his own time for performing specified tasks, apply the problem solving method to write out a daily schedule of activities and follow that schedule.	Tasks: written assignments, group tasks, etc.
4. Given the problem of planning and preparing an activity for other individuals, apply the	Party, luncheon, classroom presentation, etc.

problem solving method to develop a plan and implement the activity.

5. After using a problem solving method in a variety of situations, state his perceptions of where and how the problem solving method is applicable.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Observational Techniques, p. B-12

Suggested Resources:
F: 92, p. C-46

12. Observation Skills: Methods of observing physical conditions and behavior.

Overall Performance Objective: 1) To identify methods and factors involved in observing physical conditions and behavior and 2) to demonstrate an appropriate skill in observing behaviors.

Related Activities in Occupational Therapy: To assist in evaluation of client skills and abilities; instruct or guide client in therapeutic activities; and report client behaviors and skills.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a number of observation report forms, list and classify those forms in either objective (measureable) or subjective (judgment) categories.	Objective: ADL evaluation, JROM form, etc. Subjective: Behavior check list, behavioral description, etc.
2. Given a category of client's physical status, identify and list relevant physical factors which should be observed in order to initiate and maintain appropriate treatment precautions.	Physical status: pressure spots on skin, color of skin and nail beds, sign of fatigue, perspiration, etc.
3. Under the categories of motor and perceptual abilities, state which should be observed in Occupational Therapy.	Motor abilities: range of motion, strength, endurance, coordination, handedness, etc. Perception: color blind, etc.
4. Given categories of psychosocial behaviors, identify and list relevant behaviors to be observed in each category.	Emotional-interactive: irritability, restlessness, tenseness, anxiety, friendliness, withdrawn, out-of-contact, etc. Social-group role: initiator, supporter, etc.
5. Given categories of cognitive behaviors, identify and list relevant behaviors to be observed in each category.	Recall: Remember instructions, number of steps, recognition of colors, etc. Comprehension: able to describe or explain, calculate-add, etc. Application: make, draw, perform, according to instructions, etc.

6. Given a variety of situations to observe and purpose for each, list the behaviors or factors he sees and discuss and compare his list with others who saw the same situations.	Situation: Individual writes name on paper. Purpose: observe motor skills Situation: two individuals deciding which movie they will go to. Purpose: observe interpersonal interaction.
7. Given a number of types of observations, compare each and discuss when subjective or objective observations are appropriate and the advantages and disadvantages of each.	When describing physical condition, objective notations are appropriate. When describing emotion or feeling, objective observations are not always possible, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 1, p. C-8
VT: 5, p. C-19
F: 28, p. C-33

13. Work Simplification Techniques: Use of problem solving and body mechanics for efficient and safe performance of an activity.

Overall Performance Objective: 1) To identify and apply work simplification techniques to personal work activities and 2) to apply work simplification methods to instructing others in therapeutic activities.

Related Activities in Occupational Therapy: To ready treatment area and materials for client; assist client to and from treatment area; and to instruct client during therapy sessions.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify work simplification methods commonly used in occupational therapy.	Problem solving: planning an activity, gathering materials together, etc. Body mechanics: bending and stooping efficiently, pushing and pulling with body weight, etc. Safety Procedures: protection from heat, sharp edges, etc.
2. Describe how problem solving methods can be used to simplify his own work activities.	
3. Apply work simplification techniques to daily work activities.	Planning steps, using proper body mechanics, etc.
4. Use work simplification techniques and techniques of giving directions to instruct another individual in a variety of activities.	Cleaning a table, putting a cabinet in order, arranging furniture, cooking a meal, laying out materials for a project, performing a craft activity, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8
Suggested Evaluation:
Completion, p. B-10
Observational Techniques, p. B-12
Suggested Resources:
References, p. C-79

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

14. Safety Procedures and First Aid: Methods and procedures which reflect commonly accepted principles of personal and client protection.

Overall Performance Objective: To identify and apply safety procedures to client treatment situations and his work tasks.

Related Activities In Occupational Therapy: To maintain client and personal safety and arrange and plan storage of material and equipment for safe usage.

Suggested Objectives:	Examples:
The Learner Should:	
1. List and describe potential hazards inherent in materials and equipment commonly used in occupational therapy.	Fire hazards, sharp edges, hot surfaces, etc.
2. State how materials may be safely used.	
3. Practice using materials and equipment in a safe manner.	
4. Recognize safe storage and placement for hazardous material and equipment.	Storage of combustables in metal containers, placement of power tools with switch in "power off" position, placement of materials in cabinets in such a way that they do not fall, labeling all material containers and storage cabinets, placement of appropriate warning signals, etc.
5. Demonstrate comprehension of safety procedures in a given situation.	
6. Identify and explain methods of lifting, transporting, and carrying heavy or large items according to commonly accepted definitions of safety.	
7. List appropriate body movements used for lifting and placing items without personal injury.	

8. Identify and explain methods of lifting and handling clients, according to commonly accepted definitions of safety.

9. Relate the above methods to given disabling conditions.

10. State how to change client's position, rearrange client's clothing, and place extremities for safe transportation, escort, and treatment.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 17, p. C-11
FS: 4, p. C-23, 5 - 7, p. C-24
FL: 1, p. C-26
References, p. C-79

15. Interpersonal Relation Skills: Behaviors and methods used in facilitating interpersonal relations.

Overall Performance Objective: 1) To identify factors and techniques required for constructive interpersonal and group relationships in occupational therapy practice and 2) to apply those techniques for establishing appropriate relationships with peers, instructors, and supervisors.

Related Activities in Occupational Therapy: To exchange information; discuss client status and activities; make suggestions to staff and clients; instruct, demonstrate, and explain activities; guide, encourage, persuade, facilitate, and stimulate client activity and interpersonal skills; and observe and report client's interpersonal relationships.

Suggested Objectives:	Examples:
The Learner Should: 1. Given a list of roles played by various people in various human relationships, explain or describe his perceptions of the behaviors people exhibit in these roles.	Mother figure, authority figure, peer, sibling, dissenter, etc.
2. List behaviors which he perceives as constructive and non-constructive when people are involved in exchanging information.	Constructive: listening, asking for clarification, providing verbal and non-verbal feedback, acceptance of ideas, etc. Non-Constructive: frequent interruptions, negative personal judgment, bringing up unrelated facts or information, etc.
3. Classify the above behaviors according to whether he thinks they are constructive or non-constructive in facilitating exchange of information and state his reasons why he classified them the way he did.	

4. Explore and discuss attitudes which interfere with and facilitate the exchange of ideas.	Interfering: argumentativeness, disrespect of other opinions, etc. Facilitating: open-mindedness, eagerness to hear what the other person has to say, etc.
5. Given a list of techniques for making suggestions, classify them according to whether he thinks they are effective or ineffective in facilitating a performance and state why he classified them the way he did.	Effective: base suggestions on supporting facts, outline verbally or in writing reasons for making suggestions, etc. Ineffective: state suggestions as a command, base suggestions on feelings and opinions, etc.
6. Given a list of suggested behaviors for use in requesting assistance in performing a task, demonstrate those behaviors in requesting help or assistance from another individual.	Being courteous, clearly stating the problem, being brief, choosing an appropriate time to approach someone, etc.
7. Identify and explore his attitudes toward receiving information, advice, or instruction and compare his thoughts with those of other people.	
8. Identify and explain his perceptions of establishing rapport with another individual and, given a situation in which establishing rapport is required, demonstrate the appropriate behavior.	Greeting individual warmly, listening, providing opportunity for venting feelings, friendly attitude, etc.
9. Identify and explain his perceptions of behavioral reinforcement and, given a number of situations where behavioral reinforcement is required, demonstrate skill in applying appropriate techniques.	Encouragement, persuasion, praise (realistic), pointing out positive aspects of performance, etc.
10. Identify and explain his perceptions of techniques	

	of behavioral modification and, given a number of situations where behavior modification is required, demonstrate a skill in applying appropriate techniques.	Confrontation, suggesting alternative behaviors, withdrawing attention, removing individual from situation, diverting attention, offering energy-releasing activities, etc.
11.	Define terms in a given list of common group roles.	Leader, follower, dissenter, etc.
12.	Given a group discussion situation, analyze group role of each of the group members and classify the participants according to the above definitions.	
13.	Identify types of behaviors of group leadership and explain his perception of what they mean.	Directive, non-directive, etc.
14.	Given a group situation, demonstrate behaviors of given types of leadership.	
15.	Identify and explain his perceptions of behaviors displayed in facilitating social group interaction and, given a number of situations where social group interaction is called for, demonstrate skills in performing the appropriate behaviors.	Showing personal enthusiasm, giving withdrawn group members a helpful job to do, etc.
16.	Describe and apply methods used in stimulating and facilitating discussion.	Relate to ethnic, social, and economic status of individuals. Clarify types and kind of discussion. Assist group to determine subject matter and direction.
17.	Describe and identify behaviors exhibited by a person trying to facilitate group discussion.	Asking specific questions to people who appear disinterested, turning attention away from the group monopolizer, directing peer group pressure toward the group dissenter, etc.

18. Given a number of group situations, demonstrate skills in facilitating group interaction by applying a given number of techniques.

Suggested Teaching Strategy:
Student-Student Group, p. A-7

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
G & S: 1 - 4, p. C-7
PI: 31, p. C-13
VT: 9, p. C-19; 15, p. C-20
F: 18, p. C-30; 38, p. C-35
References, p. C-79

16. Instructional Planning and Methods: Instructional planning and the application of teaching techniques.

Overall Performance Objective: 1) To identify, expand, and apply methods of planning learning experiences and 2) to identify and apply teaching methods and media.

Related Activities in Occupational Therapy: To demonstrate assistive devices, occupational therapy procedures, equipment, and activities; teach and assist client to perform activities and procedures; and direct client activity in project or task completion.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list principles or steps in planning educational experiences commonly used in occupational therapy.	Gathering information concerning needs and abilities of client or group. Determining objectives or outcome of the learning experience. Developing appropriate step-by-step procedures.
2. Identify and discuss his perceptions of the information required for determining the abilities and needs of the client or group.	Education, motor skills, interests, etc.
3. List the kinds of information required for teaching a given individual or a group a specified activity commonly used in occupational terappy.	Teaching a hemiplegic to put on a shirt: need to know if he can understand verbal instructions, remember, feel his body in space, etc. Teaching a group a decoupage activity: need to know if they can remember instructions, handle paint brushes, use scissors, etc.
4. Identify and define the components of an instructional objective.	Audience: who will do the activity? Behavior: what must the learner do?

	Conditions: under what circumstances will the learning occur? Degree: how well or how much must be done?
5, Compose a given number of instructional objectives.	A hemiplegic adult male (audience) will put on and button his shirt (behavior) without assistance (degree) while sitting in a chair (condition).
6. Given a hypothetical treatment situation, analyze it and compose a step-by-step breakdown to complete the activity.	Putting on a shirt for a hemiplegic: 1. Lay shirt on lap with collar towards stomach, label up. 2. Put affected hand in armhole. 3. Work affected arm into sleeve until sleeve is gathered above the elbow.
7. Identify commonly used methods of giving explanations in occupational therapy and apply those methods to explain a procedure to another individual.	Speaking slowly, using simple words, asking learner if he understands, asking learner to repeat explanation in his own words, etc.
8. Identify commonly used method of giving a demonstration in occupational therapy and apply those methods in demonstrating an activity to an individual or group.	Explain clearly, position himself so that learner can see clearly, ask learner to copy movements or procedures, position learner beside demonstrator so that motions are not reversed. Demonstrate method of transfer, how to use assistive device, do a craft, etc.
9. Identify methods commonly used in occupational therapy to evaluate performance of an activity and apply these methods to establish what the outcome should be for a given number of activities.	Methods: Determine how much, how many times, to what degree a thing should be done (criteria). Determine what evidence is needed to signal client completion or mastery (measurement) of an activity. Examples: 1. Criterion: put on shirt independently. Measure: teacher observes client put on and button shirt.

	2. Criterion: set up loom with correct threading sequence and tension. Measure: welt should be by correct pattern, threads do not break, and tension is even.
10. Identify and list methods of instructing an individual or group to perform an activity commonly used in occupational therapy and apply those methods to instructing an individual or group in performance of a specific activity.	Explanation, demonstration, supervision of practice, going through the motions with the learner, stopping the learner and correcting motion, praising appropriate responses, etc.
11. Identify, list, and describe media commonly used in teaching and state its possible application to occupational therapy.	Audio-Visual media: films, film loops recordings, tape recorders, television cameras. Application: films, film loops: as demonstrations or for discussion. Recordings: for learning to follow spoken directions. Tape recorders - cameras: for feedback to learner.
12. Demonstrate an acceptable skill in using selected media to teach an activity to another individual or group.	Texts, manuals, written instructions, programmed instruction, educational toys, etc.
13. Given a specific individual or group, select an activity, plan instruction, instruct another individual or group, and compare the actual with the desired outcome of the activity.	

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-80

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

17. Community and Institutional Resources: Places and people from whom pertinent information needed in occupational therapy can be found.

Overall Performance Objective: 1) To identify a variety of community or institutional resources, 2) to describe the types of purposes of these resources, and 3) to compile required data from given resources.

Related Activities in Occupational Therapy: To gather information concerning occupational therapy, therapeutic media, resources for client treatment, and information concerning client's background and assist client in finding resources which meet client's avocational and recreational needs and interests.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list resources within his community or institution for which he can provide information or advice using his own knowledge and skills in occupational therapy practice.	Public library, medical library, community craft classes, vocational training courses, avocational training courses, avocational interest groups, college or advanced training courses, heart association, cancer society, etc.
2. Seek specifically determined information concerning a subject of his choice from one of the above identified sources.	(See independent study module)
3. Identify and list a specified number of agencies within the community which provide vital services to physically or psychosocially disabled individuals.	Goodwill Industries, mental retardation center, schools for blind and deaf, mental health centers, family and children's services, hospitals, etc.
4. Visit, seek and record specified information from a specified number of agencies.	Kind of clients served, kind of treatment or care the clients receive, overall purpose of agency, etc.
5. List a number of disciplines or professions which are frequently a part of the health care team and describe his perceptions of what they do.	Physician, nurse, nutritionist, administrator, physical therapist, social workers, etc.

6. Seek information from a given number of professions or disciplines on the kind of services or treatment provided, purpose of service, and where services can be found.	
7. Identify a given number of occupational therapy services available within the community and describe in general the kinds of clients served and treatment used.	
8. Given the opportunity to visit at least one occupational therapy clinical facility, apply observation skills and seek and record information from appropriate occupational therapy personnel or clients concerning type of facility in which the occupational therapy services is found, kinds of clients served, and kinds and purposes of treatment used.	
9. List avocational or recreational facilities within the community considered to be free and inexpensive which are available to varied age groups, handicapped, and non-handicapped individuals.	Senior citizens' centers, children's recreation programs, community recreational programs, public parks, nature study groups, YMCA, Girl Scouts, etc.
10. Describe at least one of the above facilities concerning type and purpose of the program type of activities offered, and clients served.	
11. Given the problem of finding resources for a craft or recreational activity, apply a problem solving method to finding resources or supplies for that activity.	Catalogs, stores, instruction books, etc.

Suggested Teaching Strategy:
    Student Independent, p, A-8

Suggested Evaluation:
    List, p. B-11
    Observational Techniques, p. B-12

Suggested Resources:
    PI: 18, p. C-11
    F: 12, p. C-30
    References, p. C-80

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

18. Maintenance of Materials and Equipment: Procedures commonly used in occupational therapy to maintain, store, and order equipment.

Overall Performance Objective: 1) To identify procedures for maintenance of materials and equipment, 2) to demonstrate an acceptable skill in storage and inventory planning and implementation, 3) to implement requisition procedures, and 4) to examine tools and equipment.

Related Activities in Occupational Therapy: To maintain a functional level of materials, supplies, and equipment in an occupational therapy facility.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe safe storage and placement procedures for equipment, tools, and supplies commonly used in occupational therapy.	Equipment: out of the main stream of traffic, powersaw unplugged, loom covered, door of stand-in-table closed, etc. Tools: closed cabinets to avoid dust, saw hanging to avoid warping, brushes properly cleaned and hanging to avoid bent, stiff bristles, etc. Materials: paper flat, away from light, grout in dry place, solvents in metal containers, etc.
2. Identify and list appropriate types of storage units for specified materials and equipment commonly used in occupational therapy.	Closed cabinets or drawers for paper, open, shallow cabinets for paints and books, file cabinets for designs and manuals, etc.
3. List methods for storing items commonly used in occupational therapy according to use, accessibility, size, and visibility.	Like sized items together, labeling all storage units and containers, most frequently used items placed most accessibly, etc.
4. Given a specified storage units, the learner will plan and allocate space for given materials or tools to be stored in the unit, remove, and then replace the items according to learner-prescribed plan.	

5. Evaluate and describe the effectiveness of the storage plan determined after use by others.

Items accessible? Visible? Labeled? Other individuals can find items easily?

6. List and identify inventory procedures commonly used in occupational therapy.

Counting items, listing items as used, listing as materials arrive, judging remaining amount by eye, etc.

7. Given inventory levels at the beginning and end of a specified period and a verified purchase requisition or an average number of clients and average use per client of a given item, compute the average use of items over a specified period of time.

Inventory level, Dec. 30, 1969	75 items
Requsition May 1, 1970	148 items
Total available	223 items
Inventory level Dec. 30, 1970	23 items
Average use/year	200 items

8. Given records of purchase and inventory, apply selected procedures to establish reorder points for an item.

	Purchases	Used
June	36	12
July		8
August		14
September		2

Order 3 dozen every four months or 1/2 dozen every two months.

9. Given a list of items and inventory levels over a period of time, apply selected procedures to determine reorder points and determine how much of each should be ordered.

Items	Inventory	
	3/1/68	6/1/69
White glue	12	0
Brushes	48	12
Tempera	14	2
Construction Paper	100 ea color	2-bl. or.
Nails	4 boxes	1/2 box
Enamels	14 cans	12 cans

10. Given the task of finding resources for given items, identify and compare prices and list resources with best price for each item.

Catalogs, hardware stores, variety stores, etc.

11. Given catalogs and sample order forms, fill in all of the information required for placing an order.

Stock number, minimum order level, unit, guarantee, etc.

12.	Given a sample requisition form, fill in the form with all required information.	Source, units, quantity, price, etc.
13.	Given the task of writing a memo requesting purchase of a piece of equipment, compose the memo to include justification for purchase and other factors pertinent to purchase decisions.	Reason for request, amount of use estimated for item, expected cost, source(s), etc.
14.	Analyze, compare, and contrast inventory and requisition procedures in terms of their efficiency.	Purchases from many sources may obtain better prices, but the cost is high due to more time. Frequent inventories make purchasing more efficient, but time is again a factor.
15.	Read the instructions for maintenance of a given piece of equipment and maintain that piece of equipment over a given period of time.	Oiling? How often? Cleaning? How? How often?
16.	Given a sample requisition for repairs, fill in all required information.	Serial number, dysfunction, locations, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
Multiple Choice, p. B-9
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
FS: 4, p. C-23; 5 - 7, p. C-24

19. Activities for Developmental Facilitation: Identification and application of normal development activities in a pediatric occupational therapy setting.

Overall Performance Objective: 1) To identify and discuss necessary and basic lay activities for normal growth and development, 2) to identify and discuss stressful situations and behavioral problems with children, and 3) to demonstrate an appropriate skill in selecting and implementing activities appropriate to given age levels and treatment goals.

Related Activities in Occupational Therapy: To implement therapeutic activities for children demonstrating a developmental lag and to provide support for children who are experiencing situational stress.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a number of situations involving normal children, list and describe a variety of motor, social, and cognitive learning play activities appropriate to each situation.	Situations should include: wide range of ages, individual and group play, all domains of learning, etc.
2. Define the term "situational stress" and identify stressful situations for children commonly seen in occupational therapy.	Situational Stress: situations which create an interruption of the normal developmental process which can include separation from home environment. Examples: uncomfortable, ill, in pain, separation from mother, unfamiliar environment and routine.
3. Identify common emotional and behavioral reactions to stressful situations.	New and threating people: anxiety, regression, anger, fear, grief, anger, acting out refusal to participate, etc. Anxiety: fear, crying, hiding, etc. Grief: withdrawal, turning away, etc.
4. Discuss how each situation may be exhibited by a client in an occupational therapy setting.	

5.	Discuss the roles and attitudes a technician may assume in working with children under stress.	Acceptance of feelings, encouragement of expression of feeling, gentle, but firm kindness, i.e., setting and maintaining rules, etc.
6.	Given a number of normal "behavior problems" frequently encourtered with children, apply a problem solving approach to suggest ways of dealing with the problem.	Problem: 2 year old who ways "no" to everything Ways: Don't enter into power struggle. Tell child "It's time to..." or "Now we will..." and then do it. Or, when possible, given child yes or no choice and honor his choice. Problem: 4 year old who cries each time his mother leaves. Problem: 7 year old who hits smaller children, etc.
7.	Identify a continuum of play activities commonly used in occupational therapy which encourage expression of imagination, feeling, or emotion and classify these activities according to an appropriate age range.	Ages 2-5: painting on easel, sandbox, playing house, etc. Ages 5-7: puppets, drawing, finger paints, etc. Ages 7-9: collages, drawing, painting, making up skits, etc.
8.	Given a specified treatment situation and a treatment goal, identify and list appropriate expressive media for the goal.	Situation: 4 year old girl anxious about upcoming surgery. Goal: Needs to express fears. Media: Play with doctor kit and dolls, etc.
9.	Identify a continuum of activities commonly used in occupational therapy which facilitate the development of gross motor skills and classify these activities according to an appropriate age range.	Ages 2-5: ride tricycle, jumping, rolling, throwing ball, swinging, etc. Ages 9-12: basketball, jumprope, skittles, etc.
10.	Identify a continuum of activities commonly used in occupational therapy which facilitate the development of fine motor adaptive skills and classify the activity according to age range.	Age 12-18 mos: putting items in box, retrieving them, peg board (large), etc. Age 18 mos.-3 yrs.: wooden puzzles, increasingly complex shapes and numbers of peices, etc.

11. Given a specified treatment situation and specified treatment goal, apply a problem-solving approach to suggest appropriate media and motor activities to meet the goals.	Goal: increase strength of upper extremities of 12 year old paraplegic in wheelchair. Media: throw and catch weighted basketball.
12. Given a specified treatment situation and a treatment goal, apply a problem-solving approach to suggest media and procedures to meet the goal.	Situation: 5 year old mentally retarded boy with I.Q. of 3.4 years needs experience and practice in eye-hand coordination. Media and Method: use "Lite Bright" or other peg board to make "pictures" on board.
13. Identify a continuum of activities commonly used in occupational therapy which facilitate the development of cognitive skills and classify these activities according to an appropriate age range.	Ages 2-5: naming items from pictures, puzzles (wooden), etc. Ages 9-12: telling stories, nature studies, science project, card games, etc.
14. Given a specific treatment situation and a given treatment goal, apply methods of activity analysis to suggest appropriate cognitive activities and media to meet the goal.	Situation: development of addition skills in 7 year old boy. Media: play a casino card game.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 114, p. C-51
References, p. C-80

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

20. Recreation as Habilitation: Resources for an implementation of recreational activities commonly used in occupational therapy.

Overall Performance Objective: 1) To identify the rationale and developmental appropriateness of recreational activities, 2) to list and find resources, tools, materials, and skills involved in the recreational activities most commonly used in occupational therapy, and 3) to demonstrate an acceptable skill in organizing and leading recreational activities.

Related Activities in Occupational Therapy: To plan and organize client recreation; instruct client in activities; and guide client in developing personal, social, and physical skills.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and discuss major developmental needs met by recreational activities.	Social needs: learning to relate, learning to compete, etc. Emotional needs: recognition, friendship, etc. Physical needs: exercise at developmental level of competence, etc.
2. Discuss the periods during the developmental continuum when recreational groups become a significant experience.	Periods and Groups: Early childhood: parallel play evolves into cooperation for sharing activities. Middle childhood: beginning of "gangs" and team activities - peer attitudes important. Adolescence: team and individual competition with other team members. Peer attitudes vital. Much learning from peer groups. Adulthood: separation of work groups and recreational groups. Task groups evident in both. Aging: established groups of friends important. Shared reminisence, friendly competition, group tasks, etc.
3. Identify a number of table games commonly used in an occupational therapy department and, given a	Playing cards: bridge, pinoccle, euchre, etc. Commerical games: "Monopoly,"

	list of games, classify them under an appropriate category.	"Clue," "puff billiards," etc. Paper and pencil games: "hang the man," dot and squares, "battleship," etc.
4.	List resources, materials, or set-up required for playing a given number of table games.	Instructions: rule books, party books, commercial games, rule pamphlet, materials and supplies. Bridge: playing cards (double deck), table, four chairs. Puff billiards: board, balls, syringes, table. Battleship: paper, pencil, marked squares, etc.
5.	Demonstrate an acceptable skill in playing at least one of each classification of table games.	
6.	State for what ages and group needs each activity is suited.	
7.	Identify a number of kinds of group of party games frequently used in occupational therapy and given a list a specific games, classify the games under an appropriate category.	Get acquainted games: "I went to the market...", etc. Memory games: "Observation", "Concentration", etc. Guessing games: "Twenty questions," "Charades", etc. Rythem and clapping games: "Who stole the cookies?", etc. Group skits: "The king with the terrible temper", etc. Group sings: "On Moonlight Bay", etc.
8.	List and find resources for a number of party or group games and demonstrate an acceptable skill in leading them.	
9.	State for what ages and group needs each activity is suited.	
10.	Identify a number of sport or active skill games and classify these games under an appropriate category.	Outdoor games: volleyball, badminton, tennis, archery, etc. Indoor active games: skittles, box hockey, ten-pins, basketball, etc.

11.	List resources and equipment required for a given number of sport or active game activities.	Instruction manuals, materials and equipment, space requirements, etc.
12.	Demonstrate an acceptable skill in planning and leading a given number of active skill games.	Group cooperation games, individual competition games, team games, competitive games, etc.
13.	State for what ages and group needs each game is suited.	
14.	Identify a number of kinds of dances and, given a list of specific dances, classify them according to the appropriate category.	Folk Dances: Virginia Reel, the Hora, Schottish, etc. Square Dances: Texas Star, etc. Social Dances: Shuffle, Bugaloo, etc.
15.	Demonstrate an acceptable skill in planning and leading a given number of dances.	
16.	State for what ages and group needs each dance is suited.	
17.	Given a list of specific age and/or socio-economic group classifications, identify party activities commonly seen in occupational therapy facilities.	Ages 3-5: short activities, small groups, active, frequent change. Ages 9-11: team activities, active interspersed with quiet games. Adult middle class: card games, charades, challenging party games, work games. Aged: quiet games, indoor skill. Adolescent: dances, mixer party games.
18.	Organize a plan for a party for a specific group, listing activities in sequence with materials and equipment needed for each activity.	Situation: Valentine party for 25 geriatric individuals who are ambulatory but do not know each other.
19.	Demonstrate an acceptable skill in directing a party for a specific group.	
20.	Identify outdoor activities other than games and parties commonly used in an occupational therapy setting.	Gardening, nature study, bicycling, hiking, calisthentics, etc.

21. List resources and materials required for each outdoor activity.	Plot of land, garden tools, nearby woods, etc.
22. Demonstrate an acceptable skill in planning and implementing an outdoor activity for a group of individuals.	
23. Identify audio visual equipment commonly used for recreational activities and demonstrate an acceptable skill in operating a given number and type of equipment.	Film projector, slide projector, record player, tape recorder, etc.
24. Identify and list community resources for obtaining audio-visual software and discuss potential limitations for obtaining it.	Resources: Public libraries, travel agencies, school, catalogs, etc. Limitations: budget, time, distance, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observation Techniques, p. B-12

Suggested Resources:
References, p. C-81

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

21. Applied Design, Creative and Graphic Arts: Principles of creative and graphic arts as they apply to occupational therapy treatment media.

Overall Performance Objective: 1) To identify the elements of design, 2) to identify the media required for a given number of creative or graphic art activities, and 3) to demonstrate an acceptable skill in using the media and applying techniques.

Related Activities in Occupational Therapy: To plan and arrange specified activities for clients and instruct and assist clients in activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe in his own words the elements and relationships in design.	Form, balance, perspective, dimension, etc.
2. Identify and describe in his own words the elements and relationships of color.	Hue, shade, tint, primary color, secondary colors, etc.
3. Identify the tools, materials, and equipment most frequently used in graphic arts.	Ruler, compass, pens, pencils, scissors, papers of varying weights and textures, paints, brushes, etc.
4. Given specific design elements, demonstrate an acceptable level of skill in using the media to make a design which applies the design element.	Using paint, brushes, paper to demonstrate perspective on form, etc.
5. Given specific dimensions of a figure, apply a problem solving method to identify and use appropriate media.	Draw a 3" equalateral triangle, a circle 5" in diameter, etc.
6. Identify a number of creative art processes and classify under those a number of appropriate media needed to perform in each process.	Drawing: charcoal, pencil, pastel, etc. Painting: watercolor, oils, quache, finger paint, etc. Collage: fabrics, papers, etc.

7. Given the task of creating a sample of at least one of the above processes, apply the problem solving method to use a variety of media, design elements, and colors to make a finished product.	Watercolor design (freeform), sketch of still life of model, collage, etc.
8. Identify a number of graphic arts processes and classify under those a number of methods and media for each process.	Drafting: diagrams, working drawings, etc. Printing: linoleum block, silk screen, press, etc. Modeling: leather carving, copper tooling, etc.
9. Given the task of creating a sample of each of the above graphic arts processes, apply the problem solving method to use a variety of media and design elements to make a finished product.	Block printed stationary, working drawing for woodworking project, etc.

Suggested Teaching Strategy:
Student-Independent, p. A-8
Teacher-Student Group, p. A-7

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 14, p. C-30; 21 & 22, p. C-31; 47, p. C-37; 48, p. C-38; 83, p. C-44; 91, p. C-46

22. Manual Arts: Applying methods and procedures and using tools, equipment, and other media commonly used in manual arts such as wood, plastics, and metal.

Overall Performance Objective: 1) To identify the methods, procedures, and media used in manual arts common to most occupational therapy facilities, 2) to demonstrate an acceptable skill in applying the procedures, and 3) to construct assistive or adaptive devices.

Related Activities in Occupational Therapy: To plan and arrange for clients and to instruct and assist client in activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify kinds of building materials used in manual arts in occupational therapy.	Wood, plastics, metal, etc.
2. For each identified kind of material, identify types of material and terms commonly used in materials specifications for requisitions.	Wood: walnut, pine, etc. measurements - board feet, thickness, length, etc. Plastics: types - hard, soft. Measurements - thickness, sheet size, linear measure, etc. Metal: types - steel, copper, silver. Measurements - sheet size, wire gauge, etc.
3. Identify and describe the function of a given number of hand and power tools commonly used in occupational therapy.	Hammer, saw, mitre box, jig saw, table saw, soldering iron, heat gun, power drill, screw driver, etc.
4. List procedures used in constructing items of given materials and list the materials, tools, and equipment needed for each procedures.	Wood: reading drawings to scale, cutting - saws; joining - nails, boards, screws, types of joints. Metals: cutting - shears, saws. Plastics: cutting - saws, shears; joining - bonding agents.

5. Construct a number of sample items and demonstrate an acceptable skill in using given materials, a variety of hand and power tools, and a variety of construction procedures.	Sample items: frame, book ends, copper wire bracelet, aluminum hammered ashtray, lucite picture frame, etc.
6. List and describe commonly accepted safe storage and maintenance techniques for all manual arts materials and equipment commonly used in occupational therapy.	Hammers: stored when not in use. Combustible solvents: stored in fire proof containers. Sharp tools: sharpened and stored, etc.

Suggested Teaching Strategy:
Student-Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
FS: 4, p. C-23; 5 - 7, p. C-24
FL: 3 & 4, p. C-26; 5, p. C-27
References, p. C-84

23. Ceramics: Applying methods, procedures, and techniques and using equipment, tools and materials commonly used in constructing ceramic pieces.

Overall Performance Objective: 1) To identify the methods, procedures, equipment, tools, and materials commonly used in ceramics activities in occupational therapy and 2) to demonstrate an acceptable skill in using the procedures and the media.

Related Activities in Occupational Therapy: To plan and arrange activities for clients and instruct and assist clients in activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a list of various kinds of forming procedures commonly used in ceramics, describe the building process and, from a given sample display, select examples of each procedure.	Pinch, coil, slab turned, molded, wedged, sculpted, etc.
2. Given a variety of clays commonly used in occupational therapy, describe the properities and uses of each and, from a sample display, select examples of each clay.	Red: porous, relatively plastic, medium fire, most common building clay. White: less porous, very plastic high fire, used for turning. Slip: fluid combination of clays, used for pour mold and joining.
3. Given a number of clay-forming tools, describe how each is used.	Modeling tools: cut off tool, wheel stand, paddle, wedging board, etc.
4. Identify and apply procedures usually undertaken in the preparation and storage of clay.	Preparation: wedging, making slip, etc. Wrapping techniques: storage, proper drying, amount of moisture needed, etc.
5. Demonstrate an appropriate skill in preparation and storage methods.	

6, Given the task of constructing greenware, demonstrate an accpetable skill in a variety of preparation and storing methods and a variety of forming methods.	Slab and coil pot, model figure, slip casting, making molds, sand casting, etc.
7. Identify the parts of a kiln, materials, procedures, and precautions used in firing a kiln, and, given the task of firing a greenware piece, use appropriate procedures and precautions, time and temperature, according to directions.	Parts: walls, shelves, thermostat, controls, etc. Materials: cones, wash, trivets, etc. Procedures: loading, firing, removing, etc. Precautions: electricity, cooling requirements, etc.
8. Identify and explain in his own words common techniques of decorating green or fired ware and, from a sample display, select examples of each decorated technique.	Greenware: slip painting, incising, excising. Slip: Fired ware: glazes, colors, gloss, textures, fire temperature, decolamonia.
9. Decorate green or fired ware using a given variety and number of decorative techniques and glazes.	

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
FL: 4, p. C-23
References, p. C-86

24. Sewing and Needlework: Methods, techniques, and media used in sewing and needlework activities.

Overall Performance Objective: 1) To identify methods, techniques, and media used in needlecraft and sewing activities commonly used in occupational therapy and 2) to demonstrate an acceptable skill in applying the procedures and in using media.

Related Activities in Occupational Therapy: To plan and arrange client activities; instruct and assist client in activities; and fabricate assistive devices.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a sewing machine, identify major parts of the machine and explain their function.	Sewing machine bobbin, pressure foot, pressure release, etc.
2. Identify and explain the types of sewing procedures and materials or fabrics commonly used in occupational therapy.	Cutting pattern (simple): Making seams in cotton, webbing, plastic, etc. Hemming cotton: attaching "velcro" snaps, fasteners, etc. Joining heavy and light fabrics: Making string ties:
3. Using a given number and type of hand and machine procedures, construct a sample item from a given number of materials.	Spoonholder, work apron, ADL board, hemiplegic sling, etc.
4. Identify tools and materials used in decorative stitching and describe the possible use and function of these.	Needles: embroidery, sewing, tapestry, etc. Threads: embroidery, crewel, linen, etc. Fabrics: felt, wool, linen, cotton, synthetics, webbing, etc.
5. Name types of decorative stitching and classify under each type common stitches used.	Embroidery: french knot, chain, satin, etc. Crewel: couching, running, etc. Needlepoint: gros, petit, cross, etc. Applique: applied reverse, etc.

6. Using a given number and type of decorative stitches, construct sample items using a given number of materials.

7. Given specific examples of needlework, name samples according to type of needlework used and identify and name types of sewing stitches used for each sample of needlework.

Knitting: knit, purl, cable rib, drop stitch, etc.
Crocheting: single, double, popcorn, afgan, etc.
Tatting: ring, join, etc.

8. Identify tools and materials most commonly used in needlework, describe their functions, and identify and list terms which are commonly used in ordering materials required for projects commonly used in occupational therapy.

Knitting:
- Needles: size, gauge, and length.
- Yarn: ply, weight, type (orlon, wool).
- Needle gauge: measured needles, stitch holder.

Suggested Teaching Strategy:
- Student Independent, p. A-8
- Student-Student Group, p. A-7

Suggested Evaluation:
- Matching, p. B-9
- Completion, p. B-10
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- FS: 3, p. C-23
- References, p. C-87

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

25. Weaving, Knotting and Rugmaking: Applying methods, techniques, and media, and using equipment, tools, and materials commonly used in weaving, knotting and rugmaking.

Overall Performance Objective: 1) To identify methods, techniques, and media used in weaving, knotting, and rugmaking common to most occupational therapy settings and 2) to demonstrate an acceptable skill in applying the procedures.

Related Activities in Occupational Therapy: To arrange activities for clients and instruct and assist clients in activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. From a given sample of woven good, identify the parts of woven fabric.	Warp, woof, welt, etc.
2. From a given sample display, select examples of types of woven fabric.	
3. Identify frames, looms, and tools used in various types of weaving.	Inkle, card, plain, twill, etc.
4. Identify the parts of table and floor looms, describe what kind of weaving can be done on each type of loom, and list what kind of tools are needed for each type of weaving.	Needle loom: heddles, beam, beater, slagle hood, foot pedals, hand levers, etc. Inkle loom: frameloom, braid weaving, etc.
5. Identify procedures used for a given number of looms and weaves and construct a given number of samples using a variety of looms and materials.	Frame loom: braid weaving, weave-it squares, looper, paper weaving, etc. Samples: Placemat, pillow top, belt, etc.
6. From a given knotted sample, select examples of types of knotting and knotting stitches.	Macrame or card knotting: square half hitch, double square, spiral, etc. Rug knotting: turkish knotting, rya, latch hook, colonial knotting, fringe, braid weaving, etc.

7. Identify the equipment, tools and materials required for knotting activities, describe their function or use, and identify terms most commonly used in buying materials.	Card knotting frame: cord and yarn: fiber, weight, and size. Knotting frame: sizes, measurements. Webbing: mesh size.
8. Construct a given number of sample items using a number of knotting procedures, stitches, materials, and equipment.	Macrame, jewelry, pillowtop, potholder, etc.
9. From given samples, select types of finishing techniques and state for which types of fabrication each finishing technique may be used.	Fabrication: woven, braided, Turkish knotting, braid weaving, rya, etc. Finishing: hemming, crocheted edge, stitched and fringed, applied fringe, etc. Backing: fabric, latex, rubber rings, etc.
10. Construct a sample item by using a given number of either of the above weaving or knotting methods (or others) and by finishing the edges and backing appropriately according to the expected use.	Small rug, pillowtop, wall hanging, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-88

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

26. Use of Surplus Materials: Overveiw of the resources and procedures for using surplus material.

Overall Performance Objective: 1) To identify the resources for and procedures of using surplus materials for therapeutic media, 2) to apply a problem solving method in seeking and finding resources for surplus materials and for constructing items from those materials, and 3) to apply methods of instruction to instruct other individuals to construct items.

Related Activities in Occupational Therapy: To plan and arrange client activities within client's or institutional budgetary limitations and to make optimal use of available resources and donations.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list potential community resources for obtaining surplus materials.	Places: library (book covers) community, recreation centers, craft shops, church groups, voluntary organizations, etc.
2. Identify and list resources for obtaining instructions for use of scrap or surplus materials.	Places: library, community, recreation centers, craft shops, etc. Literature: books, magazines, catalogs, manuals, etc.
3. Using the resources outlined above, select a pattern and construction method, obtain materials, and construct a useful, decorative, or recreational item from surplus or scrap materials.	
4. Given a selection of surplus materials, apply a problem solving method to construct a useful or decorative item of his choice.	Materials: plastic bottles, wire coat hangers, tin cans, scrap fabrics, yarn, lace, rickrack, boxes, old Christmas cards. To make: collage, containers, dolls, toys, splints, etc.
5. Apply a method of instruction to teach another individual to construct a useful or decorative	

item from scrap or surplus material.

Suggested Teaching Strategy:
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-89

27. Optional Media Study: Independent selection and learning of procedures for occupational therapy media.

Overall Performance Objective: 1) To identify media currently used in occupational therapy facilities, 2) to select at least one media in which the learner has had no experience, 3) to locate resources for the activity, 4) to construct a sample, and 5) to teach those construction procedures to another individual.

Related Activities in Occupational Therapy: To plan and arrange client activity and seek and provide media resources according to client's interests.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify craft activities currently used in occupational therapy facilities and select one with which he has had little or no prior experience.	Decoupage, flow-making, copper enameling, beadwork, flower-arranging, toymaking, mosiac tiles, gravel mosiac, stamp collecting, jogging, wood carving, child care, etc.
2. Locate instruments, supplies, and equipment and materials needed to perform the activity.	
3. Construct one sample of the activity using appropriate instructions and supplies.	
4. Instruct at least one other individual or group to perform the activity.	(See module on instruction)

Suggested Teaching Strategy:
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

28. Activity Analysis and Planning: Determination of psychosocial, physical, and cognitive aspects of activity, with applications to occupational therapy.

Overall Performance Objective: To apply the steps or procedures required for activity analysis and analyze human activity and human behavior.

Related Activities in Occupational Therapy: To implement prescribed treatment plans and modify or adapt treatment as directed to meet the needs of individual clients.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "activity" as it relates to the concept of therapy.	Activity is a tool of therapy changed and modified to meet many objectives.
2. List domains of human behavior, list specific behaviors exhibited by human beings, and classify specific behavior under the appropriate domain.	Psychosocial: feelings and attitudes, interpersonal relations, creativity, perception, etc. Physical: motion - range, strength and endurance, coordination, perceptual-motor skills, etc. Cognitive: perceiving, recalling, comprehension, applying, analyzing, etc.
3. Recognize that any activity includes all behavioral domains to varying extents.	Ceramics, Weaving, Playing Cards: Can include all of the behavior domains. Some domains are more pertinent than others.
4. Given pairs of behavior opposites and a general activity for each pair, state specific activity that can be used to elicit opposite behaviors.	Playing cards: Group interaction: play euchre Independent action: play solitaire Painting: Self-Expression: freehand Structure: paint by number

	Weaving: Range of motion at shoulder and elbow: use table loom Strength at shoulder and elbow: use floor loom, weighted beam.
5. Define the term "gradation" as related to activity and discuss and list a number of ways in which an activity can be gradated.	Gradation is changed by degrees, on a continuum. Ways to gradate: Time: short to long term activity. Resistence: 0 to heavy. Range: small to large. Supervision: close to none. Structure: very to little. Interaction: none to dyad to group. Responsibility: none to complete.
6. Define the term "adaption" as related to activity and discuss and list a number of ways an activity can be adapted for physical, psychosocial, and cognitive function.	Adaption is to make suitable to a therapeutic goal or plan. Ways to adapt: Physical position: e.g. standing. Standing for tolerance, activity at shoulder motion, in lap, or on table for finger motion. Resistance: motion, unilateral, degree. Coordination: unilateral, bilateral, quadrilateral. Energy expenditure: Balance: Psychosocial: structure, attitude and role of therapist, interpersonal contacts. Cognitive: number of steps, complexity of directions.
7. List and discuss the physical, psychosocial, and cognitive factors a client brings to the treatment situations which can affect his willingness and ability to do an activity.	Physical: disabling or handicapping condition, age, sex, etc. Psychosocial: attitudes, interests, socio-economic status, ethnic background, religion, etc. Cognitive: attitudes, intelligence, education, etc.

8. Given activities commonly used in an occupational therapy setting and a specified form or procedure, analyze the physical, psychosocial, and cognitive elements of the activity.	Wedging clay, weaving, playing volleyball, etc.
9. Given case studies, discuss how an activity might be planned to meet treatment goals.	Case Study: Mr. Michael B. Beadle, a 64-year ~~old male~~ white hemiplegic, 4 weeks post C.V.A. had been a Baptist Minister, very active in community action committees, admired and respected for his outspoken support of self-determination by and for his community, now has a right hemiparesis and expressive aphasia). He is emotionally liable, with frequent outbursts of preseverative curses and tears and occasional withdrawal into depression. Dr. Smythe has referred the client to speech therapy for communication skill, physical therapy for muscle re-education, ambulation, and transfer and occupational therapy for activities of daily living training. Evaluation procedures include an activities of daily living evaluation and screening for motion and sensation in the right arm, spacial perception, and balance. Although Mr. Beadle could not respond to questions with coherent sentences, he could shake or nod his head for "yes" and "no". The right arm was flaccid with no voluntary active motion. There was no positive sense for the right arm, but gross skin sensations were evident. Although emotional outbursts occurred when Mr. Beadle was frustrated, he continued willingly with the evaluation.

Since Mr. Beadle was right handed, he had difficulties with most activities of daily living (specific findings attached). Immediate goals are to assist Mr. Beadle in attaining skills in one-handed self feeding and dressing and provide an opportunity for Mr. Beadle to express his concerns concerning his future. As his condition stabilizes, goals will be adjusted according to his level of function and ability to return to previous patterns of behavior. Initial activities will include self-care training in dressing and feeding. Immediate equipment needs include: a rocking knife and a sling for the right arm (to be used only during ambulation training).

10. Given sample client histories, with treatment goals and treatment plan, select at least two appropriate activities for each, explain why each was chosen, and how it can be gradated, adapted, and implemented.

Case History:
Thirty year old housewife, 2 preteen children, chronic kidney disease, many previous hospitalizations, will have kidney transplant, anxious and fearful, needs clean, sedentary activity, emotional support, and link with husband and children. States she isn't smart enough to do knitting or crocheting.

Activities: make leather wallet for husband or mend family's clothes.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

PI: 6, p. C-9
VT: 19, p. C-21
F: 2, p. C-28; 43, p. C-37; 73, p. C-43; 90, p. C-46; 114, p. C-51
References, p. C-90

29. Written and Verbal Reports: Identifiable components and application of reporting skills.

Overall Performance Objective: 1) To identify the types of reports commonly used in occupational therapy and the reporting techniques required for each and 2) to demonstrate an acceptable skill in written and verbal reporting.

Related Activities in Occupational Therapy: To report client skills and abilities and progress; communicate with staff concerning client and facility functions; and assist in maintaining legal, financial, and statistical records.

Suggested Objectives:	Examples:
The Learner Should:	
1. From given samples of types or kinds of written reports and records, select and list those which can be classified as formal or informal types of communication.	Formal: progress reports, narrative and forms, evaluation reports, incident reports, attendance records, service reports, etc. Informal: memos, notes, etc.
2. From a given sample of types or kinds of verbal reports, select and list those which can be classified as formal or informal types of communication.	Formal: progress report to treatment team, report on journal article at staff meeting, etc. Informal: checking with nurse on client activities, reviewing client activities with supervisor, etc.
3. Identify methods and sources for gathering information commonly used in occupational therapy.	Locating: material from charts, records, involved others. Reading: charts, records, referrals. Conferring: with supervisor, social worker, physician, nurse.
4. Given a variety of situations, identify and list the types and sources of information which are commonly utilized in occupational therapy.	Situation: client with problems in self-feeding. Information needed: evaluation findings, treatment plan, vital statistics, physical diagnosis, and problems.

	Sources: charts, records, family, other professionals. Situation: report number of clients seen last month. Information needed: daily number of clients seen. Source: attendance records.
5. Given samples of medical records and charts and/or service reports and a hypothetical situation, select the appropriate information which is relevant to an occupational therapy setting.	From given medical information, what information is needed in order to determine treatment precautions? From given purchase records, what information is needed in order to determine how much of a given material was used in a given period?
6. Given samples of progress notes written by a practicing technician and a practicing therapist, determine the kinds of information inherent in each and compare and contrast the types of notes which may be written by a technician and a therapist in terms of detail.	Initial and terminal reports will probably be composed by a therapist, or with considerable input from a therapist.
7. From a given sample of formats and types of progress reports, list under each type the kinds of information needed for a progress report of that type or format.	Formats: narrative and checklist. Types: initial, continuing, terminal. Information needed: Initial: observation of clients physical status, motor abilities, psychosocial skills, formal evaluation results, treatment plan. Continuing: observation of relevant motor and psychosocial abilities, evaluation of progress, treatment changes, if any. Terminal: summary of treatment goals, progress made, evaluation of treatment, effectiveness, recommendations for future.

8. Given a treatment situation and given a treatment plan, compose observation or continuation progress report which will demonstrate an acceptable skill in using observation and reporting skills.

Situation: hemiplegic individual to learn to put on a shirt in order to develop independence.

Situation: small group of psychiatric patients to decorate a room for a party in order to develop interpersonal/social skills.

Suggested Teaching Strategy:

- Student Independent, p. A-8
- Teacher-Student Group, p. A-6
- Student-Student Group, p. A-7

Suggested Evaluation:

- Completion, p. B-10
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:

- PI: 15, p. C-10
- References, p. C-91

30. Transferring and Lifting Clients: Assisting clients to change position or move from one place to another.

Overall Performance Objective: To identify, describe, and apply methods of safe lifting and supporting a client during transfer.

Related Activities in Occupational Therapy: To assist client to and from treatment or training area and assist client in transfer to and from bed, wheel chair, stand-in-table, etc.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe body mechanics which are used to safely lift and support clients.	Moving client over center of body, stooping from the knee, pulling with body weight, etc.
2. Identify and describe types and functions of transportation equipment.	Wheelchairs, gurney carts, orthopedic carts, Stryker Frame, etc.
3. Recognize given component parts and functions of transportation equipment.	Back rests, brakes, arm rests, belts, aide guards, foot pedals, etc.
4. Identify potential hazards of each vehicle.	Client sliding or falling from vehicle, vehicle tipping or running into other objects, etc.
5. Given an individual exhibiting a specific disability and a specific vehicle, assist the individual in or onto the vehicle by applying information previously learned.	From high bed to wheelchair, wheelchair to stand-in-table, etc.
6. List specific areas in a health establishment or home where barriers to transportation may appear.	Doorways, inclined planes, stairs, curbs, elevators, etc.
7. Identify specific methods and procedures to overcome barriers commonly encountered.	Turning wheelchair around and backing onto or through a curb or doorway, etc.

8. List physical disabilities commonly seen in an occupational therapy department.	One-sided paralysis, paralyzed legs and arms, stiff joints, etc.
9. Identify methods of transferring physically disabled clients.	Helping the hemiplegic on his bad side, locking braces before lifting, supporting client in non-painful areas, etc.
10. Given a simulated patient exhibiting a selected disability, match an appropriate transfer method with a disabling condition.	
11. List ambulation equipment used by physically disabled clients.	Canes, crutches, walkers, etc.
12. Given specific instructions in helping physically disabled clients, assist a physically disabled client in going from one place to another.	
13. Analyze a given transferral, transportation, or escort situation and identify the potential hazards which may appear.	Hazards: client weight, size, or incoordination, stairs, slippery floors, doorways, etc.
14. Given a simulated transfer situation, determine an appropriate course of action to be followed.	Course: decide he can do it and perform the task, decide he cannot do it alone and seek help, find a wheelchair, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggestion Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
S: 1 - 11, p. C-16
VT: 21, p. C-22
FS: 1 & 2, p. C-23
FL: 2, p. C-26
References, p. C-91

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

31. The Helping Relationship: Rationale for and applications of therapeutic relationships.

Overall Performance Objective: To identify, interpret, and apply methods of relating to a client.

Related Activities in Occupational Therapy: To assist the client in achieving and maintaining satisfying psycho social skills outlined in the treatment plan.

Suggested Objectives:	Examples:
The Learner Should:	
1. Explore his perceptions of how he relates to other people and discuss ways in which his relationship with another individual can be altered.	
2. Given specific roles appearing in relationships between two people, discuss when and how those roles can change and analyze the roles he assumes with his friends, parents, peers, etc.	Parent roles: authoritarian, permissive, etc. Child roles: dependent, negative, etc. Adult roles: thoughtful, mutual interdependence, etc.
3. Define the term "therapeutic use of self" in his own words and explore his definition in relation to his perception of how he, as a person, can see himself as a therapeutic tool.	
4. Discuss the roles which the technician may assume in relating with clients.	Authority, friendly helper, mother substitute, etc.
5. Discuss how roles may change in a client-therapist relationship.	As client improves the technician may change from authority figure to friendly helper (peer), etc.

6. Identify and describe therapeutic attitudes commonly used in the helping relationship.	Kindness, permissiveness, firmness, anger, etc.
7. Demonstrate an acceptable skill in assuming a given attitude for a specified situation.	A firm attitude for an acting out individual, etc.
8. Identify and list techniques of behavior modification and describe the techniques.	Confrontation, suggestion of alternative behaviors, rewarding appropriate behavior, ignoring inappropriate behavior, etc.
9. Apply the above techniques appropriately to a given situation requiring behavior change.	
10. From a given critical incident in an occupational therapy setting, select behavioral responses which might be appropriate to that incident.	Incident: Depressed client saying "I don't care what happens to me, I just want to die". Regressed adult who begins banging his head on the wall. The dependent client who says "I love you". Acting-out child who has temper tamtrums, etc.
11. Identify and discuss methods for helping clients to learn and apply problem-solving methods.	Discussing problem with client, allowing him to clarify the problem, discussing alternative solutions, assisting, guiding or encouraging solution activity, etc.
12. Explore and discuss precautions which the technician must take in using therapeutic relationships.	"Where love begins, therapy ends". Interpretations to a client of his behavior or attitudes is dangerous.

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:

Completion, p. B-10
Observational Techniques, p. B-12

Suggested Resources:

PI: 3, p. C-8
F: 1, p. C-28; 20, p. C-31; 82, p. C-44; 95, p. 74
References, p. 91

32. Task Group Procedures: Participation in and exploration of techniques for effective participation in a task group.

Overall Performance Objective: 1) To identify types of therapeutic groups and 2) to discuss, recognize, and develop an acceptable skill in effective task group participation.

Related Activities in Occupational Therapy: To develop sensitivity to task group dynamics; facilitate implementation of client task groups; and work effectively as a treatment team or staff member.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define terms related to task group procedures in his own words and compare the differences between group psychotherapy and task groups.	Group procedures, group process, task group, and group psychotherapy.
2. List and describe leadership roles commonly assumed by group members.	Initiator, clarifier, time keeper, information giver, supporter, etc.
3. List and describe disruptive roles which may be assumed by group members.	Information-seeker, dissenter, etc.
4. Describe the dynamics of role assumption usually displayed by individuals in a group.	Leadership roles often are assumed according to group needs and talents.
5. Describe the dynamics of role fluctuation and change as it applies to group process.	Roles are not static during the primary phases of group processes; they shift and change according to current group process and group members' personalities.
6. Given the assignment of participating in a small task group related to occupational therapy, the learner will demonstrate skill in constructive communication techniques and group problem solving	

7. Under supervision, discuss, compare, and contrast group versus individual perceptions of each member's individual contribution.

Suggested Teaching Strategy:
Student-Student Group, p. A-7

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-92

33. Therapeutic Motor Activities: Applications of therapeutic motor exercise.

Overall Performance Objective: To identify and apply methods of teaching or training clients in motor activities which are outlined by the treatment plan.

Related Activities in Occupational Therapy: To assist the client in achieving and maintaining optimal physical function.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define and compare the meaning of "active" and "passive" joint motion.	Active: independent motion with or without resistance. Passive: assisted motion.
2. Given a specific joint motion, list activities which require that joint motion.	Finger extension: braid weaving by pushing the yarn upwards. Supination: pronation at the forearm full range, using a screw driver to join screws to wood, with elbow bent.
3. Identify signs of fatigue related to using strengthing exercises with clients.	Redness, swelling, shortness of breath, weakness, perspiration, etc.
4. Given a specific motor activity, list motor skills which are inherent in that activity.	Writing symbols on paper: be able to hold trunk in upright position, gross coordination of shoulder, elbow, wrist, pinch grasp, fine coordination of fingers, etc.
5. Identify, list, and describe muscle re-education exercises commonly used in occupational therapy.	Powder board exercises, track or skate exercises, finger exercises, etc.
6. Given examples of exercise equipment frequently used in occupational therapy, name and describe their use.	Powder boards, skates or tracks, bicycle, jig saw, therapeutic looms, finger exercise equipment, etc.

7.	With specific direction, set up selected exercise equipment for specified use and apply methods of instruction to teach another individual to perform the required exercise, as directed, with the equipment.	Add weights to looms for heavy resistance, set up finger exercise board for finger extension, teach powder board exercises for wrist extension - gravity eliminated.
8.	Recognize and describe the function of the major parts of the below-elbow and above-elbow prosthetic device.	Harness, T.D., socket, etc.
9.	Explain in his own words how the device is operated by the client.	TD openings, elbow control, TD to mouth, open and closed, etc.
10.	Identify and describe in his own words the procedures commonly used in "use" training in occupational therapy and apply methods of instruction to teach another individual to use the device in given activities.	Carry paper cup in TD, pick up and use fork, handle wallet, tie shoes, etc.
11.	Recognize the limitations of competence of the technician in selection, use, and grading of therapeutic motor activities.	Injury to client is always a potential danger, liability is a potential, and direction and supervision are required.

Suggested Teaching Strategy:
- Teacher-Student Group, p. A-6
- Student Independent, p. A-8

Suggested Evaluation:
- Matching, p. B-9
- Completion, p. B-10
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- VT: 18, p. C-21
- FS: 8, p. C-25
- F: 64, p. C-42; 108, p. C-50; 115, p. C-51
- References, p. C-92

34. Fabrication of Orthotic Devices: Identification and application of materials and methods for fabricating orthotic devices.

Overall Performance Objective: 1) To identify parts, functions, materials, and fabrication methods of splints, slings, and other orthotic devices commonly used in occupational therapy and 2) to demonstrate an acceptable skill in fabricating specific devices.

Related Activities in Occupational Therapy: To implement treatment; plan objectives; fabricate splints according to instructions; and assist the client to achieve or maintain optimal physical function.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify parts of given devices by name and state their use and function.	C - bar: separate web space. Outrigger: attachment for elastic straps.
2. Given a list of slings classified according to their body support, state their appropriate functions and use.	Shoulder-sling: hold upper arm in shoulder socket. Overhead-sling support: allow support for hand activities.
3. Identify supportive devices commonly used in Occupational Therapy and state their appropriate uses.	Foot boards, restraints, back boards, etc.
4. Identify materials and equipment used in device fabrication for Occupational Therapy and state their most appropriate uses and discuss the advantages and disadvantages of using each.	Plastics: formed by heat, often available in preformed parts, cosmetic, easy to use, but require reinforcement, etc. Aluminum: move difficult to form, less cosmetic, more rigid. Wire, Moleskin, Velcro, Webbing, etc.
5. Identify device fabrication procedures commonly used in Occupational Therapy.	Forming, adhering, and stretching plastics, bending aluminum, bending and attaching wires, making and attaching straps, attaching rivets, etc.

6. Given specified types and patterns of devices construct a number of devices to demonstrate an acceptable skill in manipulating materials and following device patterns.	Static splint, dynamic splint, sling, supportive devices, etc.
7. Apply specified procedures to put on and use selected commercially-made orthotic devices commonly used in Occupational Therapy.	Tenodesis, flexor-hinge, balanced forearm orthesis, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 35, p. C-14
VT: 10 & 11, p. C-20
F: 62, p. C-41
References, p. C-92

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

35. Activities of Daily Living Habilitation: Considerations for and application of devices and training procedures for activities in daily living.

Overall Performance Objectives: 1) To identify the developmental continuum of and factors which interfere with independent self-care and the procedures used in training clients in activities of daily living and 2) to demonstrate an acceptable skill in teaching techniques of transfer, self-care, and communication.

Related Activities in Occupational Therapy: To implement treatment plan and assist or guide client in achieving or maintaining optimal independent function.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list the developmental continuum or sequence of competence in independent activities of daily living and state at what life stage they occur.	Early childhood: self-care, feeding, mobility, walking. Middle childhood: dressing, grooming, riding tricycle. Adolescence: grooming, driving car, and taking bus.
2. Discuss the conditions or attitudes which might prevent independent competence or function in activities of daily living.	Physical dysfunction: CP, hemiplegic, etc. Psychosocial dysfunction: a disorientation, depression, dependency, etc. Developmental lag: mental retardation, etc. Cultural or ethnic values: someone else should do for them, appearance is not important, etc.
3. Identify common client attitudes which inhibit motivation for independent self-care.	"Nobody cares, so I don't", "I need you to do it for me", "That's for children", "I'm disabled, I can't do it", "It's easier to let someone else do it", "I can't be bothered", etc.

4.	Identify and discuss methods for helping individuals with negative attitudes.	Pointing out the advantages of independence, structure situations with rewards for independence, establish warm, friendly, rapport with client, approve of independence, confer with supervisor and treatment team, etc.
5.	From a given sample device, identify by name self-care and labor-saving devices commonly used in occupational therapy.	Self-feeding devices: lap-boards, reachers, holders, etc. Grooming devices: combs, brushes, etc.
6.	Describe the purpose of each device and the normal human function for which it can assist or replace.	Lap-board: support for forearms and wrists, convenient work surface, etc.
7.	Identify and list the types and sizes of wheelchairs usually available in an occupational therapy department and state the physical dysfunction for which it is appropriate to use each.	Types: regular, high back, reclining. Sizes: adult, junior, small Parts: arm rests, seat, seatboard, leg rests.
8.	Identify the major parts of the above types of wheelchairs and describe their functions as they relate to the whole.	Back rests, foot pedals, brakes, wheels, etc.
9.	Demonstrate an acceptable skill in manipulating and driving a wheelchair, in removing and replacing removeable parts, and in providing proper wheel chair maintenance.	
10.	Identify methods and devices with which individuals with specific loss of function can perform self-care activities.	Hemiplegic, paraplegic, incoordinated, weak, limited joint range for dressing, feeding, grooming, etc.
11.	Demonstrate an acceptable skill in instructing another individual to perform given self-care activities.	Eating with bilateral forearm, orthosis, combing hair with reacher, etc.

12. Identify methods and devices for individuals with specific communications losses to perform selected communication activities and demonstrate an acceptable skill in instructing a specified individual to perform given communication activities.	Unable to speak: picture boards, typewriter, writing, sign language, etc. Unable to hear: (see above). Unable to write: using mouth stick and electric typewriter, etc.
13. Identify methods and devices for driver education for paraplegic and quadriplegic individuals.	Hand brakes, hold bars, etc.
14. Demonstrate an acceptable skill in teaching a client to transfer from wheelchair to automobile.	Getting in car, folding and storing chair, getting out of car, etc.

Suggested Teaching Strategy:

- Student-Student Group, p. A-7
- Student Independent, p. A-8
- Teacher-Student Group, p. A-6

Suggested Evaluation:

- Matching, p. B-9
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:

S: 1, 3, 7-11, p. C-16
VT: 13, p. C-20; 16, p. C-21; 21 & 22, p. C-22
F: 8, p. C-29; 15, p. C-30; 33 & 36, p. C-35; 91 & 95, p. C-49
References, p. C-92

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

36. Supervision Skills: Identification and application of methods of supervision.

Overall Performance Objective: 1) To identify methods of supervision and 2) to apply these methods to specific situations.

Related Activities in Occupational Therapy: To orient, instruct, and oversee the activities of assigned clients, volunteers, staff and students.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and discuss the role of the supervisor.	Authority, director, teacher, helper, leader, etc.
2. Identify and discuss the role of the supervisee.	Follower, implementor, advocate, etc.
3. Explore and discuss given aspects of the supervisor-supervisee relationship.	Same as therapeutic relationship - How same? How different? What is the nature of the contract between supervisor and supervisee? What makes a "good" supervisor-supervisee relationship? What makes a "bad" supervisor-supervisee relationship?
4. Identify activities involved in orienting an individual to a given facility and work situation.	Touring, discussing, demonstrating, answering questions, etc.
5. Apply methods of instruction to orient another individual to a given facility or situation.	
6. Apply methods of instruction to instruct another individual in a given work procedure.	Filling out forms, taking attendance, scheduling event, etc.

7. Identify behaviors commonly used in direct individual supervision and demonstrate an acceptable skill in overseeing another individual in a given situation or task.	Orienting, instructing, observing, making suggestions, given directions, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-94

37. Vocational Readiness Activities: Identification and application of techniques to facilitate developmental work readiness.

Overall Performance Objectives: 1) To identify activities which facilitate the development of prevocational skills and 2) to demonstrate an acceptable skill in selecting, arranging, and teaching the activities and in overseeing and in guiding another individual in performance of prevocational activities.

Related Activities in Occupational Therapy: To implement client's treatment plan.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify commonly accepted prevocational goals and classify under these goals the skills required for vocational readiness or vocational training readiness.	Acceptable work habits, neatness, promptness, courtesy, efficient use of time, safe use of materials. Work tolerance, standing, sitting, attending. Basic work skills, arithmetic, reading, following directions. Interpersonal skills, accepting and being accepted by others, etc.
2. Identify and list activities or methods commonly used in occupational therapy to facilitate development of the above.	Work habits: requiring clean up during and after activity, using time cards or sheets to record attendance, etc. Work tolerance: gradated time, resistance, etc. Basic work skills: math games, etc. Interpersonal skills: task groups, etc.
3. Given a treatment goal, apply activity analysis to suggest appropriate activities and/or methods to teach another individual to perform an activity and supervise the individual in performance of the activity.	Goals: Develop ability to follow three to four step instructions. Develop worker relationships with a given group of people.

4. Identify work simplification methods for homemaking and child care tasks and instruct a specified individual to perform housekeeping or labor-saving devices.	Pre-planning of activities, stooping to lift, carrying tools on cart, etc.
5. Identify methods, devices, and home adaptations for an individual with specific loss of function and instruct him to perform homemaking tasks using appropriate methods or devices.	Tea cart for hemiplegic, one-handed bed making, one-handed can opener, elevated open sink for wheelchair patient, etc.
6. Identify methods and devices for individuals with specific disabilities to care for small children and instruct a specified individual to perform selected child care activities.	Bathing an infant from a wheelchair, picking up a toddler while handicapped by arthritis, changing an infant's diaper from a wheelchair, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 19, p. C-31; 100, p. C-48; 119, p. C-51
References, p. C-94

38. Independent Problem Solving: Applied analysis of personal needs and implementation of techniques to improve personal knowledge and skills.

Overall Performance Objective: 1) To analyze and determine personal knowledge and skill needs, 2) to seek and find resources for meeting those needs, and 3) to implement self-education in the area of need.

Related Activities in Occupational Therapy: To maintain and improve skills and knowledge in occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Analyze his proficiency lacks and his interests and determine in what general area he wishes to improve his skills.	ADL instruction. Inter-personal relationships. Group process.
2. Write a plan for independent study using previously learned methods of educational planning.	
3. Implement the plan by applying appropriate problem-solving behavior.	
4. Evaluate the effectiveness of his plan and the usefulness of the information.	Plan feasible? Plan realistic? Information useful? Applicable?

Suggested Teaching Strategy:
Student-Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 92, p. C-46

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

INFORMATION-APPLICATION MODULE

39. Evaluation Methods: Overview of techniques for administering formal and informal evaluation procedures commonly used in occupational therapy.

Overall Performance Objective: 1) To identify types of formal and informal evaluation procedures used in occupational therapy and 2) to demonstrate an acceptable skill in performing assigned evaluation procedures.

Related Activities in Occupational Therapy: To obtain information concerning client skills and abilities and provide information for treatment planning and modification.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list formal and informal evaluation procedures commonly used in occupational therapy and state evaluation methods which can be used for each kind of procedure.	Formal: structured testing situation, standardized or unstandardized tests. Informal: unstructured situation, interview and observation methods.
2. Given a list of formal evaluation procedures commonly used in occupational therapy, identify and describe the specific evaluation purpose of each.	Denver Developmental Screening Evaluation: screen for developmental milestones. ADL evaluation: independent self-care. Joint Range of Motion: Muscle Testing: strength. Azima Test Battery: interpersonal skills. Draw a Man: perception, self-image.
3. Given a list of informal evaluation procedures commonly used in occupational therapy, identify and describe the specific evaluation purpose of each.	Interview: determine interests, personal-social skills, etc. Observation: determining physical status, motor abilities, perceptual skills, interpersonal social skills, etc.

4. Given examples for formal and informal evaluation procedures commonly used in occupational therapy, compare and contrast their uses and applicability.	Formal: findings actually measurable (scores), require time and structure, useful as initial measures of client abilities and later measure of effectiveness of treatment, etc. Informal: findings not as precise, can be performed during other activities, not as threatening to client, etc.
5. Demonstrate an acceptable skill in administering, recording, and scoring according to standardized format a given number of the above formal evaluations.	JROM. ADL. Behavior Check List. Denver Developmental Screening Evaluation.
6. Demonstrate an acceptable skill in performing informal evaluation procedures.	Interview to determine interests, observation of a group interaction, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 1, p. C-8
VT: 6 & 7, p. C-19; 16, p. C-21
F: 43, p. C-37; 72, p. C-43; 109 & 111, p. C-50; 116, p. C-51

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

40. Intake: Gathering pertinent intake data.

Overall Performance Objective: To obtain information concerning client background and problem.

Suggested Objectives:	Examples:
The Learner Should:	
1. Confer with staff and supervisor about his data collection responsibilities.	Exchange information on client's background, referral, and evaluation needs.
2. Read available data regarding client and note information pertinent to occupational therapy.	Use sources such as charts, records, and referral forms.
3. Talk and exchange information with client concerning his interests, hobbies, and needs.	

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

41. Client Evaluation: Gathering information for treatment planning.

Overall Performance Objective: To administer specified evaluation procedures.

Suggested Objectives:	Examples:
The Learner Should: 1. Administer standard tests or evaluations, give directions in testing procedure, conduct procedures for test or checklist evaluation according to directions, and guide performance in evaluation.	Active joint range evaluations, coordination and hand dominance, activities of daily living, homemaking, interest checklists, behavior checklists, work readiness evaluation (such as addition tests, ability to count money, work tolerance, etc.), interests interview, etc.
2. Record results of test or evaluation.	

42. Activities Planning: Planning activities to implement treatment plan.

Overall Performance Objective: To select and arrange activities according to plan of treatment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review treatment goals or plans.	
2. Exchange information with client and staff.	Confer with client or client's family concerning client activity preference, activities that would be therapeutic, and activities that are available. Confer with staff concerning client's activities to ascertain activities which best meet requirements of treatment plan.
3. Select activities to meet client's needs.	

43. Treatment Implementation of Occupational Therapy Objectives: Implementation of predetermined plan of therapy.

Overall Performance Objective: To collaborate with the client in accomplishing predetermined therapeutic objectives.

Suggested Objectives:	Examples:
The Learner Should:	
1. Make preparations for treatment implementation.	Schedule client treatment by reviewing availability of client and staff times, checking available facilities, client location, travel times, etc. Collect materials needed for treatment and prepare them for use by cutting, forming, attaching, etc. Study materials related to client's problem by reading and reviewing texts, periodicals, and manuals. Escort client to and from treatment area.
2. Execute plan of treatment.	Verify client problems and treatment required by discussing client's treatment plan with staff supervisor, informing client of treatment procedures and goals (explaining them in understandable terms), and encouraging client participation (helping with activity and, when appropriate, participating in activities with client).
3. Guide client in modifying inappropriate behavior.	Observe individuals for signs of on-coming frustration and misbehavior, divert attention, offer energy-releasing activities, withdraw attention from individual, request assistance from another staff member, remove individual from group when behavior is unacceptable, confront client and discuss behavior with him, and suggest alternate behavior.

4.	Teach client to perform activity.	Instruct and demonstrate each step. Adapt instructions to client's abilities.
5.	Assume responsibility for therapy sessions during supervisor's absence.	
6.	Plan for continuing activity outside of treatment setting.	Confer with supervisor and staff for suggestions and guidance. Confer with client and his relatives regarding activity procedures, limitations, and available resources, etc.
7.	Arrange opportunities to practice needed skills while participating in other activities.	Games, talking and singing with client, reminding client of desired behavior, hold or support client in desired positions, etc.
8.	Implement treatment in home setting.	Instruct client and family in activity treatment procedures. Provide materials. Explain and demonstrate proceudres.
9.	Modify activities to specific situation.	Reevaluate client's physical and psychosocial skills and progress. Exchange information with other involved health professionals about client progress. Suggest remedial action for difficult or newly detected client problems. Modify planned treatment by reviewing nature of new problems, analyze possibilities of problem resolutions, consult with treatment team.
10.	Modify techniques within the framework of selected activity.	Examine skills and abilities required. Examine client's capabilities and temperament. Select appropriate skills, tools, and materials.

11. Make reports.	Provide information about client's progress in treatment through written and verbal communication. Enter information on incident reports when necessary.

44. Treatment Implementation: Developmental and Perceptual-Motor Activities: Implementation of developmental and cognitive-perceptual-motor activities.

Overall Performance Objective: To implement treatment and training for clients who demonstrate developmental or cognitive-perceptual-motor lag.

Suggested Objectives:	Examples:
The Learner Should: 1. Follow plan of treatment.	
2. Arrange activities typical of normal developmental continuum and appropriate to client's level of development.	Activities typical of normal neuromuscular developmental continuum, as directed. Activities typical of normal emotional and social developmental continuum, such as group games, parallel play, competition games. Activities that enhance development of perceptual recognition and discrimination, as directed. Activities to enhance comprehension of basic concepts and commands.
3. Arrange group or individual play, craft, or recreation sessions.	Plan activities appropriate to client's developmental level. Encourage and assist client to participate at his developmental level. Arrange activities for bed-fast client(s).

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

45. Treatment Implementation: Therapeutic Motor Activities: Implementation of physical rehabilitation plan in occupational therapy.

Overall Performance Objective: 1) To implement specific therapeutic motor activities and 2) to construct orthotic and assistive devices as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. Confer with staff about work assignment.	
2. Review treatment plan.	
3. Plan a routine progression of motor activities.	Discuss activities with supervisor to determine strength, range of motion, coordination, and endurance required. Select routine progression of motor activities in terms of gross to fine, light to heavy weight, frequency and time.
4. Guide client in activities.	Instruct in activity. Observe and aid performance.
5. Construct devices.	Confer with staff and supervisor to determine type and design of splint. Receive specific directions for fabrication.
6. Fabricate splints or slings as directed.	Measure extremity. Gather materials. Trace pattern. Manipulate materials to form splint. Attach fasteners according to splint design.
7. Modify, adjust, or fabricate such body supports as needed.	Cut, file, or form items and attach fasteners as directed.
8. Instruct client, relatives, and involved health care workers as directed in proper use of device, limitations, and precautions.	

9. Report client's use of device.	
10. Perform prosthetic check-out procedures as directed.	Conduct standard prosthetic check-out procedure. Confer with prosthetist if device does not fit or function properly.
11. Conduct functional training in use of prosthetic device, describe function of parts, demonstrate function of parts and basic movements of device, and guide practice of basic movements.	Wrapping stump, putting on and removing device. Flexion, extention of elbow unit, and opening and closing of terminal device.
12. Train client in use of devices and present problem-solving situations that may be used in daily life.	Handling objects of various sizes and shapes, handling money, carrying paper cup, cutting food, etc.
13. Instruct client in skills of independence and self-care.	Observe client in his daily environment to identify client problems. Demonstrate activity, such as dressing, grooming, feeding, handling money, etc. Suggest and demonstrate substitute motions and assistive devices when needed.
14. Instruct client in methods of homemaking and child care.	Demonstrate tasks such as cooking, cleaning, feeding and bathing a child, etc. Suggest substitute motion, assistive devices, and work simplification methods. Observe and guide client's performance.
15. Instruct in methods of transfer and mobility.	Demonstrate methods of transfer such as wheelchair to toilet, bed to wheelchair, opening doors, etc. Demonstrate methods of mobility such as moving over curbs, taking a bus, getting into a car, etc.
16. Instruct in written and oral communication skills.	Demonstrate tasks such as handwriting, typing, use of a telephone, etc.

	Guide performance. Suggest substitute motions. Demonstrate assistive devices.
17. Train client in driver education.	Select and order special equipment, if needed. Observe and evaluate client's ability to operate automobile safely. Instruct in driving skills.
18. Inform client of available self-help devices.	Provide examples. Suggest resources for client to acquire device.
19. Modify, adjust, or fabricate self-help or assistive devices.	Construct or adapt devices such as spoons, cup holders, plate guards, transfer boards and lap boards, by cutting and forming materials, wrapping tape, and attaching handles or fasteners.
20. Encourage client's independent self-care.	
21. Select and guide motor activities of client restricted to mechanical sustainers.	Mechanical sustainers: respirators or dialysis units. Determine appropriate activities. Review suggested activities with client. Instruct client in activity.

46. Treatment Implementation: Psychosocial Activities: Implementation of psychosocial rehabilitation plan in occupational therapy.

Overall Performance Objective: To implement treatment according to treatment plan for client who demonstrates psychosocial dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. Confer with staff and client to determine appropriate activities or experiences for client and to gain information and understanding of client's problems.	
2. Arrange therapeutic activities and experiences, as directed, suggest selected activities to client, and instruct and demonstrate activities by:	
Arranging activities to develop interpersonal social skills.	Arrange social group activities, act as a group catalyst, participate in client groups, encourage client discussions, and interrelationships, etc.
Implementing task-oriented group or individual sessions.	Arrange sessions, instruct and demonstrate activities, exchange information with client concerning his skills, feelings, attitudes, etc.
Implementing client work-oriented group sessions.	Arrange group times and places, facilitate group activities, encourage individual client participation, etc.
Aiding client to modify behavior.	Select and use appropriate therapeutic techniques, such as encouraging appropriate behavior when possible, setting limits, confronting client, and discussing behavior.

3. Implement opportunities for client to practice skills needed in his expected environment after leaving the institution or program. Discuss with client when he will use these activities by:	
Implementing client's plan of recreational activity.	Arrange client planning group sessions, encourage each client to participate in planning; assist client in implementing recreational activities, etc.
Providing opportunities for client to practice and discuss personal and social skills.	
Implementing client's activities in the community.	Confer with staff regarding continuing activity outside treatment setting, assist client in making contacts outside treatment setting, encourage and support client's "outside" activities, arrange day care activities outside the in-hospital setting as directed.
4. Continuously gather information concerning client behavior.	Observe and report client's characteristic way of behaving, his appearance, his physical condition, etc. Report such client skills as interpersonal skills, ability to solve problems, ability to accept responsibility, etc.
5. Implement changes in treatment program.	Report behavior to staff and supervisor, exchange information concerning needed changes, confer with client about activity preferences within treatment goals, arrange changes as directed, etc.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

47. Treatment Implementation: Prevocational Activities: Implementation of work readiness training plan.

Overall Performance Objective: To arrange opportunities to develop the client's work readiness skills as related to the occupational therapy goals and objectives.

Suggested Objectives:	Examples:
The Learner Should:	
1. Administer work readiness evaluation or tests.	Confer with supervisory staff concerning emotional, cognitive, social, psychosocial, and physical skills. Observe and test basic work skills and work tolerance.
2. Arrange training program as directed.	Select activities appropriate to vocational or prevocational needs. Develop procedures for instructing client in activities. Set up correct sequence of activity performance. Coordinate client's scheduled activities within work schedule.
3. Instruct client in selected activities.	Explain procedures. Demonstrate task or use of equipment. Assign a work station.
4. Supervise client's performance.	Observe client's performance. Encourage client to work with minimal supervision. Confront client with inappropriate behavior. Give directions for personal work habits.
5. Report client's behavior and degree of success in task performance.	

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

48. Treatment Implementation: General Activities Programs: Organization and implementation of general activities programs.

Overall Performance Objective: To organize and carry out general recreational and arts and crafts programs in health care facilities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review activity program recommendations.	Confer with client and staff. Review recommendations, oral and written.
2. Help clients plan activities.	Facilitate task group decisions.
3. Plan activity sessions with ~~client~~ either in health care facility or in client's home.	Arts and crafts, recreational games, parties, entertainment, group discussions, remunerative activities, or community services.
4. Arrange activity sessions.	Confer with or write requests to staff. Obtain needed facilities, space, and materials. Schedule activities. Notify clients of activities available.
5. Develop procedures for instructing client in activities.	
6. Direct recreational activities programs.	Card games, group field trips, dances, group sings, parties, etc. Gather clients together, encourage client participation, assist or direct staff to assist clients unable to plan their own recreation, etc.
7. Coordinate or arrange details of social activities planned by clients.	Schedule meeting place, report information to clients concerning client planning for programs, arrange to implement group's plan (schedule kitchen facilities, make reservations, arrange for travel, etc.).

8. Coordinate overall group direction for client's community service programs.	Suggest or direct client's service projects, notify community agencies of available client services, etc.
9. Instruct client to perform activity.	Encourage client participation. Converse with client to determine his interests. Explain purposes and benefits in terms understandable to client. Demonstrate procedures. Explain activity. Adapt directions to client's capabilities.
10. Supervise or oversee client performance.	Guide task completion by observing, encouraging, or praising good work as necessary. Direct staff to assist client.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

49. Treatment Implementation: Family and Community Participation: Implementation of family and community participation in client care.

Overall Performance Objective: To assist family and community members' continuance of treatment or training programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Exchange information with client's family and other health care workers through written or oral reports.	Client's progress, client's behavior and capabilities, treatment plan, activities, etc.
2. Instruct client, family, and other health care workers in activities to continue outside therapy sessions.	Explain reasons for activity, demonstrate procedures, observe client, relative, or worker perform task, direct repeat of performance until performance is adequate, etc.
3. Suggest special services to community agencies and volunteers.	"Talking books", tutoring, reading to the blind, "meals on wheels", shopping, etc.

50. Treatment Implementation: Treatment Reporting: Documentation of treatment.

Overall Performance Objective: To document the findings of evaluation, treatment or training, and client progress.

Suggested Objectives:	Examples:
The Learner Should:	
1. Gather information at regular intervals.	Behavioral observation, client participation, client achievement, information from other staff members and volunteers.
2. Confer with referring physician, supervisor, staff, or other agencies about treatment plan, treatment implementation, client progress, etc.	Give information. Receive advice, direction, or assistance.
3. Write and distribute reports.	Progress notes, activity reports, etc., as directed.
4. Report verbally to appropriate personnel.	Supervisor, treatment team, other agencies, etc.

51. Termination or Follow-Up: Activities involved in discharge procedures.

Overall Performance Objective: To suggest plans for client's discharge from occupational therapy services.

Suggested Objectives:	Examples:
The Learner Should:	
1. Recommend termination of occupational therapy services.	Record progress, discuss progress with client, discuss progress and termination with staff, etc.
2. Suggest client's discharge plans.	Confer with supervisor about possible discharge plans. Confer with client's family and other health care workers about such things as future needs, available resources, and appropriate follow-up treatment.
3. Implement discharge plans.	Inform client of availability of continuing care. Inform client's family and other health care workers about discharge plans. Demonstrate post-discharge activities, equipment catalogs, or examples.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

52. Participation in Program Planning and Coordination: Participation in occupational therapy service coordination and direction.

Overall Performance Objective: To assist in coordinating and establishing programs, policies, and procedures.

Suggested Objectives:	Examples:
The Learner Should:	
1. Exchange information during occupational therapy staff meetings.	Overall establishment procedures, suggest procedural changes, new policies, and procedures.
2. Exchange written and verbal information with faculty and staff.	Attending assigned staff meetings and completing opinion questionnaires or reports as requested.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

53. Program Implementation: Materials, Equipment, and Supplies: Maintenance of equipment, materials, and supplies.

Overall Performance Objective: To maintain equipment, materials, and supplies.

Suggested Objectives:	Examples:
The Learner Should:	
1. Verify purchase orders.	Check incoming equipment and supplies with purchase order form.
2. Establish times for reordering.	Estimate length of time to exhaust current supplies, plan to order ahead of this time to allow for shipping, etc.
3. Arrange space and methods for storage.	Design and allocate storage space considering such things as client dysfunction, frequency and sequence of use, size of materials, etc. Determine methods of storage in accord with establishment procedures and safety regulations.
4. Check equipment and request necessary repairs.	Take inventory and store equipment and supplies. Check equipment for proper operation. Submit requests for repair when necessary.
5. Request purchase of needed supplies.	Notify supervisor of needs. Complete and submit requisition forms.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

54. Personnel Recruitment: Activities involved in finding and hiring new workers.

Overall Performance Objective: To assist in personnel recruitment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Inform supervisor of known qualified individuals seeking employment.	Exchange information concerning recruitment possibilities.
2. Aid in recruitment of applicants.	Post advertising in publications, initiate phone calls, and initiate personal contacts. Notify local professional organizations and notify personnel department of staff vacancies.
3. Interview assigned prospective employees.	Talk with applicants. Record information concerning job experience, education, training, physical and personal qualifications.

55. Self-Education: Improvement of personal knowledge and skill.

Overall Performance Objective: To seek out information to improve his basic job knowledge and skills.

Suggested Objectives:	Examples:
The Learner Should:	
1. Attend continuing education lectures, seminars, and workshops.	Listen to lectures, discuss aspects of client care, and participate in demonstrations or practice sessions.
2. Receive instruction during individual instructional or counseling sessions.	Exchange information and discuss techniques, problems, and personal work skills.
3. Read and study materials.	Tests, periodicals, and manuals related to pathologies, treatment techniques, and methods.

PREPARATION FOR OCCUPATIONAL THERAPY TECHNICIAN

CLINICAL APPLICATION MODULE

56. In-Service and Continuing Education: Activities involved in planning and conducting in-service and continuing educational programs.

Overall Performance Objective: To assist personnel, staff, students, volunteers, and conference or workshop groups in inservice, clinical, and continuing education.

Suggested Objectives:	Examples:
The Learner Should:	
1. Orient assigned persons.	Conduct tours of establishment. Explain client needs or treatment. Demonstrate or discuss techniques of art and craft methods, play experiences, activities of daily living training, etc.
2. Compile data to be used in continuing education and personnel training.	Gather suggestions from trainees. Exchange information with supervisor. Make suggestions for innovations and changes.
3. Exchange information with staff and make suggestions for activities.	Advise assigned individuals of activities and general recommendations for client treatment. Discuss specific activity techniques.
4. Receive directions for participation in training.	

57. Consultation Assistance: Activities involved in providing assistance to consultee agencies.

Overall Performance Objective: To assist in planning activities program(s) for consultee agency.

Suggested Objectives:	Examples:
The Learner Should:	
1. Survey facility.	Tour facility, examine records, such as number, age, type of clients requiring activities, etc.
2. Gather data concerning specific facility and clients.	
3. Compile data as assigned to advise consultant concerning health care facility so that he may advise consultee.	Facility programs, equipment, budget limitations, client activity and interest patterns, and degree of overall interest in specific activities.
4. Inform prospective consultees of available services.	Circulate brochures, write letters, phone or arrange for conferences with agency staff, etc.

58. Research Assistance: Activities involved in aiding research projects.

Overall Performance Objective: To compile data for research projects as directed.

Suggested Objectives:	Examples:
The Learner Should:	
1. Gather specific data as directed.	Note pertinent items, interview clients, survey records.
2. Post specific data as directed.	Note required data. Tabulate required data.
3. Record data on appropriate forms.	

59. Public Information: Activities involved in public relations.

Overall Performance Objective: To inform the community of the health care facility and occupational therapy services.

Suggested Objectives:	Examples:
The Learner Should: 1. Collect narrative and statistical information to be disseminated.	
2. Participate in public relations projects and programs.	Suggest programs during committee meetings. Receive direction regarding programs. Implement special programs such as open house, craft shops, Christmas program, etc., as assigned.
3. Familiarize professional and lay persons with health care facility and occupational therapy services.	Conduct tours and explain ongoing activities. Give talks at meetings.

PREPARATION FOR OCCUPATIONAL THERAPIST

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Curriculum Guide for Preparation of:
Occupational Therapist

INTRODUCTION

THE OCCUPATIONAL THERAPIST FUNCTION

The data base for development of this curriculum guide is the job description of which a summary is presented below. Complete job descriptions are presented in a Job Description Manual developed from this project. Comprehensive descriptions of the procedures for development of the job descriptions and the curriculum guides are presented in a Procedure Manual developed from this project.

This curriculum guide has been developed to prepare an individual to perform the following activities:

Occupational Therapist (Program Supervision)

General Definition: *Supervises, coordinates, and implements activities of occupational therapy programs in hospitals, clients' homes and other settings, to habilitate or rehabilitate physically or psychosocially disabled clients:*

Establishes goals, policies, standards, and plan of service for occupational therapy unit. Formulates, integrates, and implements occupational therapy policies, procedures, programs, and organizational structure by identifying program needs, applying for funding or support, planning for required personnel, space, and materials to provide for required needs within establishment or community. Organizes and directs services by applying occupational therapy and management principles, work experiences, staff communication, and advisement or directions from administrative and medical personnel.

Assists in planning specific occupational therapy program proposals or research projects by compiling, evaluating, analyzing, integrating, and interpreting data on program and rehabilitation needs. Reviews budget and organizational limitations or problems to plan and implement program or project for establishment or consultee agency. Consults with community agencies (such as state mental health division, public school, and geriatric facilities) to propose and coordinate occupational therapy programs by advising agency representatives in community care facilities of means to identify problems before client institutionalization is necessary, and maintain post-institutionalization care for clients.

Screens and observes referred clients to ascertain suitability for intake and treatment by personal client interview and conferences with other involved parties or referral sources. Evaluates client by reviewing intake data, administering and interpreting tests, and by observing, analyzing, and recording behavior to determine client's abilities or function in order to plan treatment goals and program details and assist in diagnostic procedures. Formulates treatment plan by reviewing client's level of function, conferring with client and family, and determining immediate and long range goals. Schedules clients and assigns cases to staff.

Supervises treatment of client by conferring with client, physicians, staff, or specialists and adapting treatment techniques required by individual situation in order to promote psychosocial function, physical function, developmental, perceptual, cognitive, and motor abilities, adjustment to disability and community orientation.

Analyzes client developmental and perceptual motor function, and determines therapeutic program to stimulate maturation.

Guides behavior of clients demonstrating psychosocial dysfunction by analyzing data about client, designing opportunities for drive sublimation, planning and facilitating interpersonal and social group sessions, planning and arranging task or work-oriented group activities, and counseling client to cope with future environment through providing practice with and discussion of application of needed skills in order to promote optimal psychosocial function.

Analyzes data about client to determine, design, and implement therapeutic motor activities that promote or conserve optimal physical function (such as upper extremity prosthetic and orthotic training, therapeutic exercise, activities of daily living) within client disability limits by designing, selecting, evaluating, and directing activities and devices that promote optimal range of motion, strength, endurance, coordination, and independent physical function.

Develops programs to supervise and train client on prevocational basis by planning and arranging skills evaluation and directing procedures that stimulate learning of skills, work tolerances, acceptable work habits, and social skills which prepare clients for vocational training or sheltered workshops.

Informs, counsels, and consults with client's family and other health care workers to obtain cooperation and continuity in therapy.

Documents evaluation, implementation and integration of treatment or training plan and client progress by analyzing, summarizing, and preparing written and verbal reports to authorities to promote communication, evaluate progress, maintain legal and financial records, and coordinate client services. Attends case conferences with physician and other specialists to discuss and evaluate client's function, progress, and plan for therapy.

Formulates occupational therapy discharge plans to ready client and family for non-establishment care and to provide continuation of treatment goals by discussing plans with client, instructing client, relatives, and other health care workers, and recording progress and recommendations.

Coordinates services by recruiting, selecting, orientating, training, evaluating, or when necessary, dismissing occupational therapy employees, students, and volunteers to meet requirements of client population and establishment. Plans, organizes, coordinates, and directs in-service education and clinical training programs for establishment staff, students, and volunteers by analyzing training needs, formulating educational objectives, determining teaching methods, implementing educational programs, and evaluating staff to satisfy all requirements set by establishment professional association and educational institution.

Performs related duties: Plans and coordinates purchasing of required equipment, materials, and supplies for program needs by reviewing and authorizing purchase requests and by projecting and budgeting future demands of programs. May coordinate data collection and review data surveys concerning health care and services within community to determine extent of occupational therapy service needs by surveying and conferring with health professionals and community organization *representatives. Receives instruction in order to maintain and improve skills and knowledges by participating in in-service or continuing education programs and by reading and reviewing materials related to work. Assists and participates in local, state, or national conferences by planning specific learning experiences, arranging for specialist's instruction, and by leading demonstrations and talks to train health related personnel under program of continuing education.*

Qualifications for Entry into the Curriculum

In order to delineate the attitudes, aptitudes, and educational level required for entry into each curriculum level, selection specifications were developed. (Detailed description of their development is included in Appendix D of this manual.)

The selection specifications for entry into the Occupational Therapist Curriculum are:

1. Have language development at level 5 GED.
2. Have mathematics development at level 4 GED.
3. Have reasoning development at level 5 GED.
   (The General Educational Development Scale for level 5 in language and reasoning, and for level 4 in mathematics, includes the items listed on the chart on page 249.)
4. Be in the top third of the general population in intelligence.
5. Desire situations dealing with people and working for their presumed good and prestige.
6. Desire situations concerning the communication of ideas to people.
7. Desire situations involving the direction, control, and planning of activities.
8. Desire to work with people beyond giving and receiving instructions.
9. Desire situations involving the evaluation of information against judgmental criteria.
10. Desire indoor employment with very few outside activities.
11. Desire a job with light or sedentary physical activities.
12. Be able to devote 1 to 2 years to training.

The job description lists the performance expected of the learner at the completion of the curriculum; the selection specifications are the requirements for entry into the curriculum; the curriculum guide suggests learning experiences which enable an individual who meets the selection specifications to obtain compentencies required for job performance.

GENERAL EDUCATIONAL DEVELOPMENT SCALE*

LEVEL V (COLLEGE 1-2)

Language Development			Reasoning Development
Read or write speeches, book and play reviews, scientific and technical materials, abstracts, financial reports and legal documents. Be conversant in the theory, principles and methods of effective and persuasive speaking, including voice, diction and phonetics, in discussion and debate.	**Reading:**	Literature, book and play reviews, scientific and technical journals, abstracts, financial reports, legal, historical and medical documents, periodicals.	Apply principles of logical or scientific thinking to define problems, collect data, establish facts and draw valid conclusions. Interpret an extensive variety of technical instructions, in books, manuals or mathematical or diagrammatic form. Deal with several abstract or concrete variables.
	Composition:	Analysis and practice of expository techniques with emphasis on organization of material and development of unity.	
	Logic:	Study of the principles of inductive and deductive reasoning, such as testing evidence, validity of generalizations, and cause and effect relationships to detect fallacies in arguments and to avoid these errors in own writing.	
	Rhetoric:	Study of the collection, arrangement, and expression of subject matter to persuade or instill an acceptance of ideas in the mind of the reader.	
	Creative Writing:	Develop a free and independent skill in writing, based on own knowledge and experience.	
	Narrative Writing:	Develop a sequential and descriptive style of writing.	
	Playwriting:	Study and application of theory of dramatic writing.	
	Speaking:	Effective Speaking: Study in the selection, organization of material and delivery of speech. Development of voice control, poise and confidence. Persuasive Speaking: Emphasis on composition of speech and principles of persuasion. Voice and Diction: Study of standards of speech. Record speech and study recording to develop voice control volume, pitch and rate. Phonetics: Study and classification of sounds of speech. Discussion and Debate: Study of types and principles of public and group discussions. Methods in leading discussion; practice in argumentation and debate.	

LEVEL IV (GRADES 9-12)

Mathematical Development		Mathematics Curriculum
Perform arithmetic, algebraic, and geometric operations as applied to standard situations; perform shop mathematics operations in practical application to the manual arts.	**Algebra:**	Elementary algebra with formal study of number systems, and sets and set operation. Operations on polynomials and rational expressions, solution of equations and inequalities, use of deduction and proof. Extended study of the systems of real numbers: linear, quadratic, rational, exponential, logarithmic, angle and circular functions, inverse functions; related algebraic functions, limits and continuity, probability and statistical inference.
	Geometry:	Deductive axiomatic geometry, plane and solid, using the properties of real numbers; the introduction and use of rectangular coordinates. Extension of trigonometry and solid geometry.
		Technical/Vocational School
	Shop Math:	Review and extension of principles of common and decimal fractions, percentage, ratio and proportion. Practical computation, logarithms, slide rule. Practical algebra. Metric geometry. Essentials of trigonometry Formulas for computing ratios of pulleys and gears. Practical Physics: formulas for work and power, etc.

*From: Guide for Relating General Educational Development to Educational Curriculum. U.S. Department of Labor, Manpower Administration, 1971.

Some suggestions for structuring the Occupational Therapist curriculum are provided in the following paragraphs.

DEVELOPMENT OF CURRICULUM FOR THE OCCUPATIONAL THERAPIST

The modules were designed as "building blocks" for learning knowledges and skills. Each module is probably related to all of the others in some fashion; however, these module "blocks" may be put together in many varied ways.

Curriculum development from this guide may be approached as four interrelated processes:

1. Clustering modules to develop tentative course work.
2. Sequencing to include placement of course work in a learning continuum.
3. Assembly of course work to include instructional objectives, instructional strategies, media, evaluation methods and time span of course.
4. Determination and placement of affective learning.

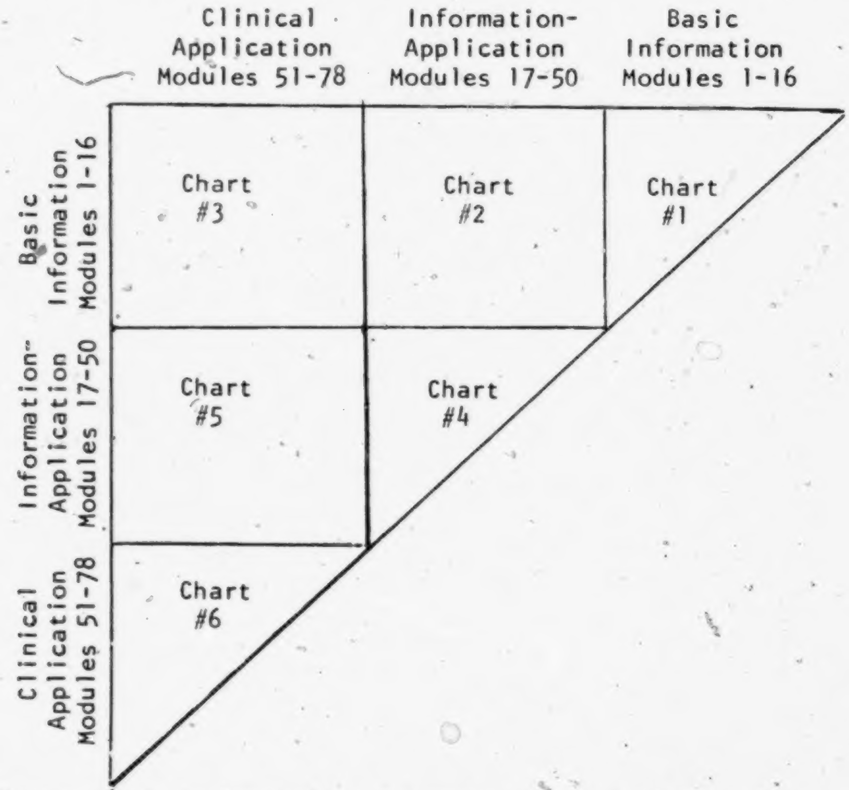
1. Module Clusters. Decisions must be made as to how modules will be grouped. Each module will remain as is, be combined with others or be divided to form a course of study. Several approaches are possible.

   The charts beginning on page 253 indicate a number of ways in which modules may be clustered. They may be read in the same manner as a mileage chart on a road map. Each module is listed across both the vertical and horizontal axes. Each of the cells on the chart contains a letter which indicates a relationship between a module on the vertical axis and a module on the horizontal axis. Suggested relationships between modules are keyed as follows:

   I = *the two modules may be learned independently of each other.*
   R = *the modules are related to each other. There is a potential for sequencing the two modules along a linear time continuum.*
   C = *module content provides close intrinsic relationship and may potentially be clustered.*
   S = *the modules may be learned simultaneously or concurrently in time. Content areas are extrinsically related, and each may enhance the learning of the other.*

/ = may be read as "or" or "and". In some cases, when 2 modules are related (R) to each other, aspects of each may be clustered (C) or learned simultaneously (S).

Due to limitations of page size, it was not possible to combine these six charts indicating module relationships into one. However, it is possible for the reader to "paste up" the six charts as illustrated below:


Clinical Application Modules 51-78
Information-Application Modules 17-50
Basic Information Modules 1-16
Basic Information Modules 1-16
Information-Application Modules 17-50
Clinical Application Modules 51-78
Chart #3
Chart #2
Chart #1
Chart #5
Chart #4
Chart #6

Assume that one wanted to determine the relationship(s) between two modules, for example, module #5 "Communication", and module #21 "Interpersonal Relationships". Module #5 is a basic information module, and #21 is an information-application module. Therefore, the reader would turn to chart #2 "Interrelationships Among Basic Information and Information-Application Modules." Locate #5 on the vertical axis and #21 on the horizontal axis. At the point where the lines for #5 and #21 cross may be found the code R/C which indicates that the two are related and may be clustered.

Another example might be the information-application modules concerning general occupational therapy principles, #36, "Evaluation of Client Function", and #37, "Treatment Planning". As one looks across the horizontal lines for #36 and #37 in chart #4, one sees a large group of cells which contain the legend R/C, indicating potential clustering with such other modules as: "Vocational Readiness", "ADL", "Orthotic Design", "Sensorimotor and Cognitive-Perceptual-Motor Function", "Physical Function", "Geriatrics", and "Mental Health". Obviously, Evaluation of Client Function and Treatment Planning are related to a number of other modules, and may potentially be divided and parts of them clustered with the other modules.

2. Sequencing of course work. Decisions concerning placement of course work in a learning continuum are interdependent with decisions concerning course work content. Consideration must be given to prior, concurrent, and subsequent learning for each course.

   For example, should the module "Normal Human Development" be learned prior to, concurrent with or after the modules "Introduction to Occupational Therapy" and "Human Gross Anatomy"? These decisions are dependent upon the course content vis-a-vis the learner's knowledge and aptitudes, and within the context of the institutional setting.

   Again, the charts beginning on page 253 may give some assistance.

   Modules are listed on each axis in a linear learning sequence. They are grouped according to the content area and in increasing complexity of learning. However, learning is rarely linear. For example, module #12 "Psychopathologies" may not require #10 "Kinesiology" as a prerequisite, but it may require #4 "Human Psychology". All three of those modules may be prerequisite to #26 "Activity Analysis".

   The use of the charts to determine suggested, related, and simultaneous learnings should provide direction for designing alternative course sequences for a variety of learners in several different settings. One potential sequencing pattern for the modules contained in this guide is presented on page 265.

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

1. Interrelationships Among Basic Information Modules

Legend:

I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

BASIC INFORMATION MODULES

BASIC INFORMATION MODULES	16. Pediatric Conditions	15. Orthopedic Conditions	14. GM&S Conditions	13. Neurologic Conditions	12. Psychopathologes	11. Health Care Systems	10. Kinesology	9. Neuroanatomy/physiology	8. Gross Human Anatomy	7. Human Struc/Funct	6. Medical Terminology	5. Communication	4. Human Psychology	3. Cultural Sociology	2. Human Development	1. Introduction to O.T.
1. Introduction to O.T.	R	R	R	R	R	R/S	R	R	R	R	R	R	R	R	R	1
2. Human Development	R	R	R	R	R	I	R	R	R	R	R/S	R	R/S	R/S	2	
3. Cultural Sociology	R	R	R	R	R/S	R/S	I	I	I	I	R	R/S	R/S	3		
4. Human Psychology	R	R	R	R	R/C	I	I	R/S	R/S	R/S	R	R/S	4			
5. Communication	I	I	I	I	R	R	I	I	I	R	R	5				
6. Medical Terminology	R	R	R	R	R/C	R	R	R	R/C	R/C	6					
7. Human Struc/Funct	R	R	R	R	R	I	R	R	R/C	7						
8. Gross Human Anatomy	R	R	R	R	R	I	R/C	R/C	8							
9. Neuroanatomy/physiology	R/S	R/S	R/S	R/C	R/S	I	R/C	9								
10. Kinesiology	R	R/S	R	R/S	I	I	10									
11. Health Care Systems	R	R	R.	R	I	11										
12. Psychopathologies	R/C	I	R	R	12											
13. Neurologic Conditions	R/C	R/C	R	13												
14. GM&S Conditions	R/C	R	14													
15. Orthopedic Conditions	R/C	15														
16. Pediatric Conditions	16															

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

2. Interrelationships Among Basic Information and Information–Application Modules

LEGEND:
I = independent of
R = related to
c = clustered with
s = simultaneous with
/ = or

INFORMATION–APPLICATION MODULES

BASIC INFORMATION MODULES

	50. Supervision Skills	49. Program Planning	48. Management Skills	47. Applied Research	46. Vocational Readiness	45. ADL Training	44. Orthotic Design	43. Prosthetic Training	42. Sensorimotor and C.-P.-M. Tx.	41. O.T. for Physical Funct.	40. O.T. in Geriatrics	39. Helping Relationship	38. O.T. and Mental Health	37. Treatment Planning	36. Evaluation of Funct.	35. Community Prob. Solv.	34. Independent Prob. Solv.	33. Written Communication	32. Observation Skills	31. Weaving, Knotting	30. Sewing and Needlework	29. Ceramics	28. Manual Arts	27. Applied Design	26. Activity Analysis	25. Recreation	24. Play as Habilitation	23. Instructional Planning	22. Group Problem Solving	21. Interpersonal Relat.	20. Transferring Clients	19. Safety Techniques	18. Work Simplification	17. Problem Solving Approach	
1. Introduction to O.T.	R	R	R	R	R	R	R	R	R	R	R	R	R	R/C	R/C	R	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R/C	1
2. Human Development	I	R	I	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R/C	2
3. Cultural Sociology	R	R	R	R/C	R_S	R	R_S	R	I	R	R	R	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R	R	I	I	I	R/C	3
4. Human Psychology	R	R	R	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R	R	I	R	I	R/C	4
5. Communication	R	R	R	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R	C/S	R	R	R	R/C	5
6. Medical Terminology	I	I	I	R/C	I	I	R	R	R	R	R	I	R	R	R	I	R/C	R	I	R	R	R	R	R	R	I	I	I	I	I	I	I	I	R/C	6
7. Human Struc/Funct	I	I	I	R/C	R	R	R	R	R	R	R	I	I	R	R	I	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	R	R	I	R/C	7
8. Gross Human Anatomy	I	I	I	R/C	R	R	R	R	R	R	R	I	I	R	R	I	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	I	R	R	R/C	8
9. Neuroanatomy/physiology	I	I	I	R/C	R	R	R	R	R/S	R	R	I	R	R	R	I	R/C	I	R	R	R	R	R	R	R	I	I	I	I	I	I	R	R	R/C	9
10. Kinesiology	I	I	I	R/C	R	R	R	R	R/S	R	R	I	I	R	R	I	R/C	I	R	R	R	R	R	R	R	I	I	I	I	I	I	R	R/C	R/C	10
11. Health Care Systems	R/S	R/S	R/S	R/C	R	I	I	I	I	R	R	I	R	R	I	R/C	R/C	R	I	I	I	I	I	I	I	R	R	R	I	I	I	R/C	I	R/C	11
12. Psychopathologies	R	I	I	R/C	R	R	I	I	R	I	R	R	R/C	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	I	R	R	I	R/C	R	R/C	12
13. Neurologic Conditions	I	I	I	R/C	R	R	R	R	R/S	R	R	I	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	R	R/C	R	R_C	13
14. GM&S Conditions	I	I	I	R/C	R	R	I	I	I	R	R	I	I	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	R	R/C	R	R/C	14
15. Orthopedic Conditions	I	I	I	R/C	R	R	R/C	R	I	R	R	I	I	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	R	R/C	R	R/C	15
16. Pediatric Conditions	I	I	I	R/C	R	R	R	R	R/S	R	I	I	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	I	I	I	R	R/C	R	R/C	16
	50	49	48	47	46	45	44	43	42	41	40	39	38	37	36	35	34	33	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

3. Interrelationships Among Basic Information and Clinical Application Modules*

Legend:

I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

CLINICAL APPLICATION MODULES

BASIC INFORMATION MODULES	78. Consultation Data Coll.	77. Consultation Continuing	76. Consultee Staff Trng.	75. Activities Prog Plng.	74. Preventive Health Plng	73. Research	72. Public Information	71. Continuing Education	70. Volunteer Training	69. Clinical Education	68. Personnel Management	67. In-Service Education	66. Self-Education	65. Program Reporting	64. Program Management	63. Program Coordination	62. Term. and Follow-up	61. Treatment Records	60. Client's Family and Commun.	59. Prevocational Training	58. Physical Function	57. Psychosocial Function	56. C.-P.-M Function	55. Supervision of Implement.	54. Tx Implement and Coord	53. Treatment Planning	52. Client Evaluation	51. Intake	
1. Introduction to O.T.	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	1
2. Human Development	R	R	R	R	R	R	R	R	R	R	R	R	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	R	2
3. Cultural Sociology	R	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	3
4. Human Psychology	R	R	R	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	4
5. Communication	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	5
6. Medical Terminology	R	R	R	I	I	R	I	R	I	R	I	I	R	R	I	R	R	R	I	R	R	R	R	R	R	R	R	R	6
7. Human Struc/Funct	R	R	R	R	I	R	I	R	R	R	I	I	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	R	7
8. Gross Human Anatomy	R	R	R	I	I	R	I	R	I	R	I	I	R	I	I	I	R	R	R	R	R	I	R	R	R	R	R	R	8
9. Neuroanatomy/physiology	R	R	R	I	I	R	I	R	I	R	I	I	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	R	9
10. Kinesiology	R	R	R	I	I	R	I	R	I	R	I	I	R	I	I	I	R	R	R	R	R	I	R	R	R	R	R	R	10
11. Health Care Systems	R/S	R	R	R	R	R	I	R	R	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R	11
12. Psychopathologies	R	R	R	R	R	R	I	R	R	R	I	I	R	R	I	R	R	R	R	R	I	R	R	R	R	R	R	R	12
13. Neurologic Conditions	R	R	R	R	R	R	I	R	R	R	I	I	R	I	I	R	R	R	R	R	R/S	R	R	R	R	R	R	R	13
14. GM&S Conditions	R	R	R	R	R	R	I	R	R	R	I	I	R	I	I	R	R	R	R	R	R	I	I	R	R	R	R	R	14
15. Orthopedic Conditions	R	R	R	R	R	R	I	R	R	R	I	I	R	I	I	R	R	R	R	R	R	I	I	R	R	R	R	R	15
16. Pediatric Conditions	R	R	R	R	R	R	I	R	R	R	I	I	R	I	I	R	R	R	R	R	R	R	R	R	R	R	R	R	16
	78	77	76	75	74	73	72	71	70	69	68	67	66	65	64	63	62	61	60	59	58	57	56	55	54	53	52	51	

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

4. Interrelationships Among Information-Application Modules

LEGEND:
I = independent of
R = related to
c = clustered with
s = simultaneous with
/ = or

INFORMATION APPLICATION MODULES

INFORMATION-APPLICATION MODULES	50. Supervision Skills	49. Program Planning	48. Management Skills	47. Applied Research	46. Vocational Readiness	45. A.D.L. Training	44. Orthotic Design	43. Prosthetic Training	42. Sensorimotor & C-P-M Tx.	41. O.T. for Physical Funct.	40. O.T. in Geriatrics	39. Helping Relationship	38. O.T. and Mental Health	37. Treatment Planning	36. Evaluation of Funct.	35. Community Prob. Solv.	34. Independent Prob. Solv.	33. Written Communication	32. Observation Skills	31. Weaving, Knotting	30. Sewing and Needlework	29. Ceramics	28. Manual Arts	27. Applied Design	26. Activity Analysis	25. Recreation	24. Play as Habilitation	23. Instructional Planning	22. Group Problem Solving	21. Interpersonal Relat.	20. Transferring Clients	19. Safety Techniques	18. Work Simplification	17. Problem Solving Approach
17. Problem Solving Approach	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	17
18. Work Simplification	R	I	R	R	R	R/C	R	R	I	R	R	I	I	I	I	I	R C	I	R	R	R	R	R	R	R	R	R	R	O	O	R	R	18	
19. Safety Techniques	R/S	R	R/C	I	R	R/S	R	R/S	R/S	R/S	R/S	I	R/S	R/S	R	R	R/C	R	R	R/S	R/S	R/S	R/C	R	R	R	R	I	I	I	R/C	19		
20. Transferring Clients	I	I	I	I	I	R/C	I	I	I	R/C	R	I	I	I	I	I	R C	I	R	R	R	R	R	R	I	R	R	I	I	I	20			
21. Interpersonal Relat.	R	I	R	R/C	R	R	R	R	R	R	R	R/S	R	R	R	R	R/C	I	R	R	R	R	R	R	R	R	R	R	R/C	21				
22. Group Problem Solving	R	R	R	R/C	I	I	I	I	I	I	R	R	R C	R	R	R C	R/C	I	R	R	R	R	R	R	R	R	R	R	22					
23. Instructional Planning	R	R	R	R/C	R	R	R	R	R	R/S	R/S	R	R/S	R	I	R	R/C	I	R	R	R	R	R	R	R	R	R	23						
24. Play as Habilitation	I	R	R	R/C	I	I	I	I	R	R	I	R	R	R	R	I	R/C	I	R	I	I	I	I	R	R	R	24							
25. Recreation	I	R/C	R	R/C	R	I	I	I	R	R	R/S	R	R	R	I	R	R/C	I	R	I	I	I	I	I	R	25								
26. Activity Analysis	I	I	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R	R/C	C	R	R	R/C	R	R	R/C	R/C	R/C	R/C	R/C	26									
27. Applied Design	I	R	R	I	R	I	R	I	I	R	R	I	R	R/S	R	I	R/C	I	R	R/C	R/C	R/C	R/C	27										
28. Manual Arts	I	R	R	I	R/S	I	R	R	I	R	R	I	R	R/S	R	I	R/C	I	R	R	R	R	28											
29. Ceramics	I	R	R	I	R/S	I	I	I	I	R	R	I	R	R/S	R	I	R/C	I	R	R	R	29												
30. Sewing and Needlework	I	R	R	I	R/S	R	R	I	I	R	R	I	R	R/S	R	I	R/C	I	R	R/C	30													
31. Weaving, Knotting	I	R	R	I	R/S	I	I	I	I	R	R	I	R	R/S	R	I	R/C	I	R	31														
32. Observation Skills	R	I	R	R/C	R	R	R	R	R	R	R	R	R	R	R/C	I	R/C	R	32															
33. Written Communication	R	R/C	R	R/C	R	R	R	R	R	R/C	R/C	R	R/C	R/C	R/C	R	R/C	33																
34. Independent Prob.-Solv.	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	34																	
35. Community Prob. Solv.	I	R/C	R	R/C	R	R	I	R	R/S	R/S	R/S	I	R/S	R	R	35																		
36. Evaluation of Funct.	I	R	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R	R/C	R/C	36																			
37. Treatment Planning	I	R	I	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	37																				
38. O.T. and Mental Health	I	R/C	R	R/C	R/S	R/S	I	R	R/S	R	R/S	R/C	38																					
39. Helping Relationship	I	I	I	R/C	R/C	R/C	R	R/C	R/C	R/C	R/C	39																						
40. O.T. in Geriatrics	I	R/C	R	R/C	R	R/C	R	I	I	R/S	40																							
41. O.T. for Physical Funct.	I	R/C	R	R/C	R/S	R/C	R/C	R/C	R/C	41																								
42. Sensorimotor & C-P-M Tx.	I	R/C	R	R/C	R	R	R	R	42																									
43. Prosthetic Training	I	R	R	R/C	R/C	R/C	R	43																										
44. Orthotic Design	I	R	R	R/C	R	R	44																											
45. A.D.L. Training	I	R	R	R/C	R	45																												
46. Vocational Readiness	I	R	R	R/C	46																													
47. Applied Research	R	R	R	47																														
48. Management Skills	R/C	R/S	48																															
49. Program Planning	R/S	49																																
50. Supervision Skills	50																																	

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

5. Interrelationships Among Information - Application and Clinical Application Modules

CLINICAL APPLICATION MODULES

Legend:
I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

	78. Consultation Data Coll.	77. Consultation: Continuing	76. Consultee Staff Trng	75. Activities Prog. Plng	74 Preventive Health Plng	73 Research	72 Public Information	71 Continuing Education	70 Volunteer Training	69 Clinical Education	68 Personnel Management	67 In-Service Education	66 Self Education	65 Program Reporting	64 Program Management	63 Program Coordination	62 Term and Follow Up	61 Treatment Records	60 Client's Family and Comm.	59 Prevocational Training	58 Physical Function	57 Psychosocial Function	56 C-P-M Function	55 Supervision of Implement.	54 Tx Implement and Coord.	53 Treatment Planning	52 Client Evaluation	51 Intake	
17. Problem Solving	R	R	R	R	R	R	R	R	R	R	R	R	R/C	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	17
18. Work Simplification	I	R	R	R	I	I	I	I	R	R	R	I	I	I	R	R	R	I	R	R/C	R/C	R/C	I	R	R	R	I	I	18
19. Safety Techniques	I	R	R	R	R	R	I	R	R	R	R	R	I	I	R	R	R	R	R	R	R	R	R	R	R	R	R	I	19
20. Transferring Clients	I	I	R	R	I	I	I	I	R	R	I	I	I	I	R	I	R	I	I	I	R	I	I	R	I	I	R	I	20
21. Interpersonal Relat.	I	R	R	R	R	R	R	R	R	R	R	[illegible]	I	I	R	R	R	R	R	R	R	R	R	R	R	R	R	R	21
22. Group Problem Solving	I	R	R	R	R	R	I	R	R	R	R	R	R	I	R	R	R	I	R	R	R	R/C	I	I	R	R	I	R	22
23. Instructional Planning	I	R	R/C	R	R	I	R	R/C	R/C	R/C	R	R/C	R	I	R	R	R	I	R	R/C	R	R	R/C	R	R	R/S	R	I	23
24. Play as Habilitation	I	I	I	R	R	I	I	I	R	R	I	I	R	I	I	I	R	I	R	I	R	R	R	R	I	R	R	R	24
25. Recreation	I	I	R	R/C	R	I	I	I	R	R	I	I	R	I	I	I	R	I	R	R	R	R	R	R	R	R	R	R	25
26. Activity Analysis	I	R	R	R	R	R	I	I	I	R	I	I	R	I	I	I	R	R	R	R	R	R	R	R	R	R	R	R	26
27. Applied Design	I	I	R	R	I	I	I	R	R	R	I	R	I	I	R	I	I	I	I	R	R	R	R	I	I	R	R	I	27
28. Manual Arts	I	I	R	R	I	I	I	R	R	R	I	R	I	I	R	I	I	I	I	R	R	R	R	I	I	R	R	I	28
29. Ceramics	I	I	R	R	I	I	I	R	R	R	I	R	I	I	R	I	I	I	I	R	R	R	I	I	I	R	R	I	29
30. Sewing and Needlework	I	I	R	R	I	I	I	R	R	R	I	R	I	I	R	I	I	I	I	R	R	R	I	I	I	R	R	I	30
31. Weaving, Knotting	I	I	R	R	I	I	I	R	R	R	I	R	I	I	R	I	I	I	I	R	R	R	I	I	I	R	I	I	31
32. Observation Skills	R	R	R	R	R	R	I	R	R	R	R	R	R	I	I	I	R	R	R	R	R	R	R	R	I	R	R	R	32
33. Written Communication	R	I	I	R	R	R	R	I	R	R	I	I	R	R	I	R	I	R	I	R	R	R	R	I	I	R	R	R	33
34. Independent Prob.-Solv.	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	34
35. Community Prob. Solv.	R	R	R	R/C	R/C	R	R	R	I	I	I	R	R	I	I	I	I	I	R	R	I	I	I	I	I	R	I	I	35
36. Evaluation of Funct.	I	R	R	I	R	R	I	R	I	R	I	R	R	I	R	I	R	R	R	R/C	R/C	R/C	R/C	R/C	R	R	R/C	R/C	36
37. Treatment Planning	I	R	R	R	I	I	I	I	I	R	I	R	R	I	R	I	R/C	R	R/C	R/C	R C	R/C	R/C	R/C	R	R/C	R/C	R C	37
38. OT and Mental Health	R	R	R	R	R	R	R	R	R	R	I	R	R	I	R	I	R	R	R	R	R	R/C	R	R	R/C	R/C	R/C	R/C	38
39. Helping Relationship	I	R	R	I	I	I	R	R	R	R	I	R	R	I	I	I	R	I	R	R	R	R/C	R	I	I	R	R	R	39
40. O.T. in Geriatrics	R	R	R	R/C	R	R	R	R	R	R	I	R	R	I	R	I	R	R	R	I	R	R	I	R	R	R/C	R/C	R/C	40
41. O.T. for Physical Funct.	R	R	R	R	R	R	R	R	R	R	I	R	R	I	R	I	R	R	R	R	R/C	R	R/C	R/C	R/C	R/C	R/C	R/C	41
42. Sensorimotor & C-P-M Tx.	R	R	R	I	R	R	I	R	R	R	I	R	R	I	R	I	R	R	R	R	R	R	R/C	R/C	R/C	R/C	R/C	R/C	42
43. Prosthetic Training	I	I	I	I	I	R	R	R	I	R	I	R	R	I	R	I	R	R	R	R	R	R	I	R/C	R/C	R/C	R/C	R/C	43
44. Orthotic Design	I	I	I	I	I	R	I	R	I	R	I	R	R	I	R	I	R	R	R	R	R	I	I	R/C	R/C	R/C	R/C	R/C	44
45. A.D.L. Training	I	R	R	R	I	R	R	R	R	R	I	R	R	I	R	I	R	R	R	R	R	R C	R C	R/C	R/C	R/C	R/C	R/C	45
46. Vocational Readiness	I	R	R	I	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	R	R/C	R	R	R	R/C	R/C	R/C	R/C	46
47. Applied Research	R/C	I	I	I	R	R/C	I	R	I	R	I	R	R	I	I	I	I	R	R	R	R	R	R	R	R	R	R	R	47
48. Management Skills	R	R	R	R	R	R	I	R	R	R	R/C	R	R	R	R/C	R	I	I	I	R	I	I	I	R	R	R	R	R	48
49. Program Planning	R/C	I	I	R/C	R/C	R	R	R	R	R	R	R	R	R	R	R	I	R	R	R	R	R	R	R	R	R	R	R	49
50. Supervision Skills	I	R/C	R	I	I	I	I	R	R	R/C	R/C	R	R	I	R	R	R	I	R	R/C	R	R	R	R/C	R	R	R	R	50
	78	77	76	75	74	73	72	71	70	69	68	67	66	65	64	63	62	61	60	59	58	57	56	55	54	53	52	51	

SUGGESTIONS FOR CLUSTERING AND SEQUENCING THE OCCUPATIONAL THERAPIST MODULES

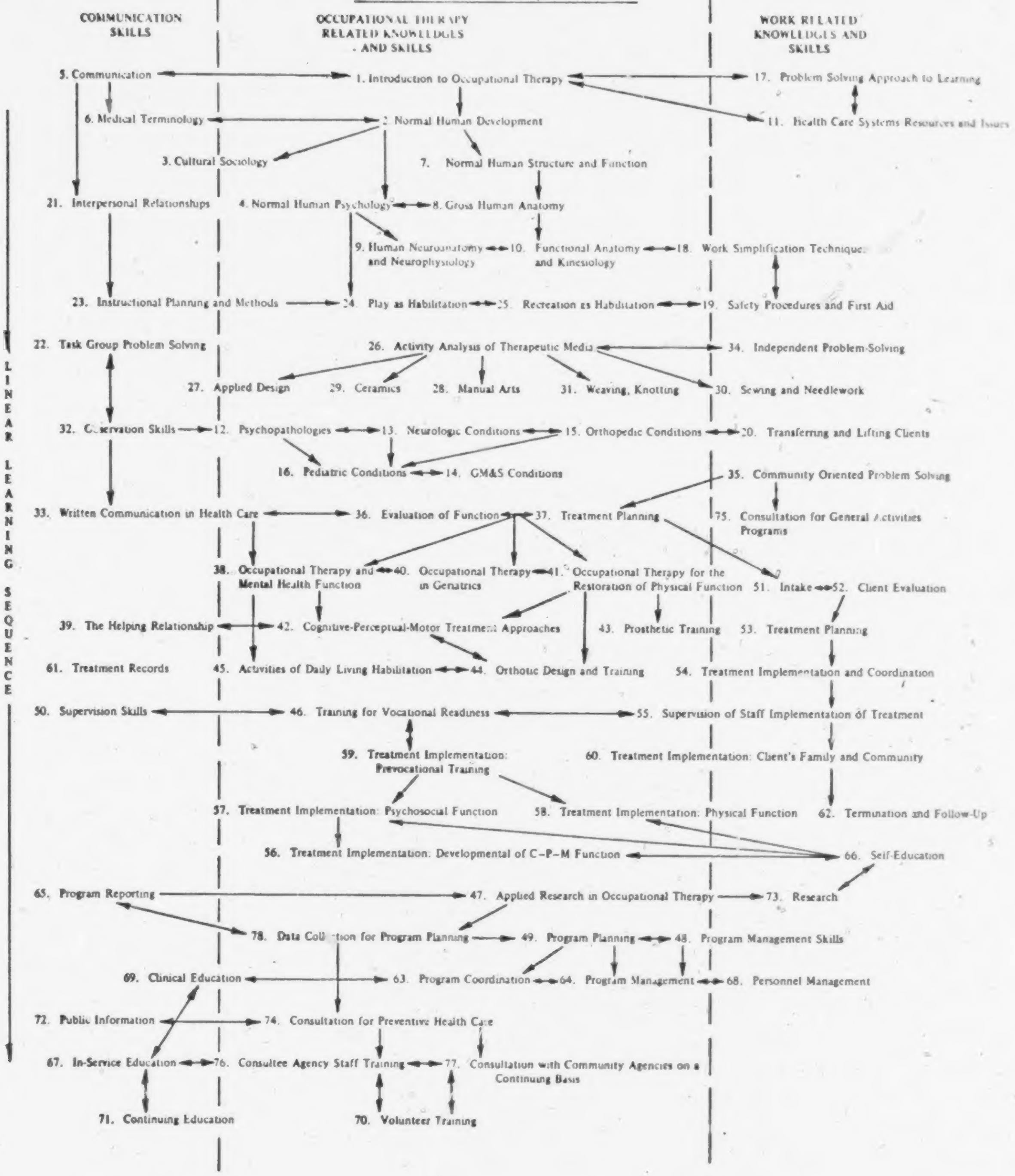
6. Interrelationships Among Clinical Application Modules

Legend:
I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

CLINICAL APPLICATION MODULES

CLINICAL APPLICATION MODULES	78. Consultation: Data Coll.	77. Consultation: Continuing	76. Consultee Staff Trng.	75 Activities Prog. Plng	74 Preventive Health Plng	73 Research	72 Public Information	71 Continuing Education	70 Volunteer Training	69 Clinical Education	68 Personnel Management	67 In-Service Education	66 Self-Education	65 Program Reporting	64 Program Management	63 Program Coordination	62 Term and Follow-up	61 Treatment Records	60 Client's Family and Commun	59 Prevocational Training	58 Physical Function	57. Psychosocial Function	56. C-P-M Function	55 Supervision of Implement.	54 Tx Implement and Coord.	53 Treatment Planning	52 Client Evaluation	51. Intake
51. Intake	I	R	R	I	I	R	I	I	I	R	I	I	C	I	I	R	I	R	R	R	R	R	R	I	I	R/C	R/C	51
52. Client Evaluation	I	R	R	I	R	R	I	R	I	R	I	R	C	I	I	I	R	R	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	52	
53. Treatment Planning	I	R	R	I	R	R	I	R	I	R	I	R	C	I	R	R	R	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	53		
54. Tx Implement and Coord.	I	R	R	R	R	R	I	R	I	R	R	R	C	I	R	R	R/C	R/C	R/C	R/C	R/C	R/C	R/C	R/C	54			
55. Supervision of Implement.	I	R	R	R	I	R	I	I	R	R	R	I	C	I	R	R	R/C	R	R/C	R/C	R/C	R/C	R/C	55				
56. C.-P.-M. Function	I	R	R	I	R	R	R	R	R	R	I	R	C	I	R	I	R/C	R/C	R/C	I	R/C	R/S	56					
57. Psychosocial Function	I	R	R	R	R	R	R	R	R	R	I	R	C	I	R	I	R/C	R/C	R/C	C/S	R/S	57						
58. Physical Function	I	R	R	R	R	R	R	R	R	R	I	R	C	I	R	I	R/C	R/C	R/C	C/S	58							
59. Prevocational Training	I	R	R	R	R	R	R	R	R	R	R	R	C	I	R	R	R/C	R/C	R/C	59								
60. Client's Family and Commun.	I	R	R	R	R	R	R	R	R	R	I	R	C	I	R	R	R/C	R	60									
61. Treatment Records	R	R	R	I	I	R	I	R	I	R	I	R	C	R	I	R	R	61										
62. Term. and Follow-up	I	R	R	I	I	R	I	R	I	R	I	R	C	I	I	R	62											
63. Program Coordination	R	R	R	R	R	R	I	R	R	R	C/S	R	C	R	C/S	63												
64. Program Management	R	R	R	R	R	R	I	R	R	R	C/S	R	C	C/S	64													
65. Program Reporting	R	R	R	R	R	R	R	R	I	R	R	R	C	65														
66. Self-Education	C	C	C	C	C	C	C	C	C	C	C	C	66															
67. In-Service Education	I	R	C	R	R	R	I	C	C	C	R	67																
68. Personnel Management	I	R	R	R	R	R	I	R	R	R	68																	
69. Clinical Education	I	R	R	R	R	R	R	R	R	69																		
70. Volunteer Training	I	I	R/C	I	I	I	R	I	70																			
71. Continuing Education	R	R	R	R	R	R	R	71																				
72. Public Information	R	R	I	R	R	R	72																					
73. Research	R/C	R	R	R	R	73																						
74. Preventive Health Plng.	R/C	R/C	R/C	R/C	74																							
75. Activities Prog. Plng.	R/C	R	R/C	75																								
76. Consultee Staff Trng.	I	R/C	76																									
77. Consultation: Continuing	R	77																										
78. Consultation: Data Coll.	78																											

SUGGESTED LEARNING SEQUENCE
PREPARATION FOR OCCUPATIONAL THERAPIST


COMMUNICATION SKILLS
OCCUPATIONAL THERAPY RELATED KNOWLEDGES AND SKILLS
WORK RELATED KNOWLEDGES AND SKILLS
LINEAR LEARNING SEQUENCE
5. Communication
1. Introduction to Occupational Therapy
17. Problem Solving Approach to Learning
6. Medical Terminology
2. Normal Human Development
11. Health Care Systems Resources and Issues
3. Cultural Sociology
7. Normal Human Structure and Function
21. Interpersonal Relationships
4. Normal Human Psychology
8. Gross Human Anatomy
9. Human Neuroanatomy and Neurophysiology
10. Functional Anatomy and Kinesiology
18. Work Simplification Techniques
23. Instructional Planning and Methods
24. Play as Habilitation
25. Recreation as Habilitation
19. Safety Procedures and First Aid
22. Task Group Problem Solving
26. Activity Analysis of Therapeutic Media
34. Independent Problem-Solving
27. Applied Design
29. Ceramics
28. Manual Arts
31. Weaving, Knotting
30. Sewing and Needlework
32. Observation Skills
12. Psychopathologies
13. Neurologic Conditions
15. Orthopedic Conditions
20. Transferring and Lifting Clients
16. Pediatric Conditions
14. GM&S Conditions
35. Community Oriented Problem Solving
33. Written Communication in Health Care
36. Evaluation of Function
37. Treatment Planning
75. Consultation for General Activities Programs
38. Occupational Therapy and Mental Health Function
40. Occupational Therapy in Geriatrics
41. Occupational Therapy for the Restoration of Physical Function
51. Intake
52. Client Evaluation
39. The Helping Relationship
42. Cognitive-Perceptual-Motor Treatment Approaches
43. Prosthetic Training
53. Treatment Planning
61. Treatment Records
45. Activities of Daily Living Habilitation
44. Orthotic Design and Training
54. Treatment Implementation and Coordination
50. Supervision Skills
46. Training for Vocational Readiness
55. Supervision of Staff Implementation of Treatment
59. Treatment Implementation: Prevocational Training
60. Treatment Implementation: Client's Family and Community
57. Treatment Implementation: Psychosocial Function
58. Treatment Implementation: Physical Function
62. Termination and Follow-Up
56. Treatment Implementation: Developmental of C–P–M Function
66. Self-Education
65. Program Reporting
47. Applied Research in Occupational Therapy
73. Research
78. Data Collection for Program Planning
49. Program Planning
48. Program Management Skills
69. Clinical Education
63. Program Coordination
64. Program Management
68. Personnel Management
72. Public Information
74. Consultation for Preventive Health Care
67. In-Service Education
76. Consultee Agency Staff Training
77. Consultation with Community Agencies on a Continuing Basis
71. Continuing Education
70. Volunteer Training

3. Assembly of course work. As a course is assembled, the following processes should take place:

   a. Clarify and specify instructional objectives.
   b. Estimate the amount of time (number of hours, number of credits, etc.) the course should require.
   c. Determine teaching strategies and methods.
   d. Determine teaching media, bibliographical resources, or texts.
   e. Determine evaluation instrument (classroom or laboratory test) to be used.

Example: Assume that the following six modules are to be combined into a course of instruction:

Activity Analysis of Therapeutic Media: Detailed determination of physical, cognitive-perceptual-motor, social and enculturation aspects of activity with implications in treatment planning.

Therapeutic Media: Applied Design, Creative and Graphic Arts: Principles of creative and graphic arts as they apply to occupational therapy activities analysis and program planning.

Therapeutic Media: Manual Arts: Application and analysis of procedures, use of tools, equipment and other media commonly used in manual arts (such as wood, plastics, and metal).

Therapeutic Media: Ceramics: Analysis and application of methods, procedures and techniques and use of equipment, tools, and materials commonly used in constructing ceramic pieces.

Therapeutic Media: Sewing and Needlework: Application and analysis of methods, techniques, and media used in sewing and needlework activities.

Therapeutic Media: Weaving, Knotting, and Rugmaking: Analyses and applications of methods, techniques, and media, use of equipment tools, and materials commonly used in weaving, knotting, and rugmaking.

   a. Clarify and Specify Instructional Objectives: Following are the overall performance objectives:

      Activity Analysis: To apply the steps or procedures required for activity analysis to analyze human activity and human behavior.

Applied Design: 1) To identify the elements of design, 2) to identify the media required for a given number of creative or graphic art activities, and 3) to demonstrate an acceptable skill in analyzing an activity to determine its behavioral and therapeutic aspects.

Manual Arts: 1) To identify the methods, procedures, media, and specifications used in manual arts common to most occupational therapy facilities, and 2) to demonstrate an acceptable skill in analyzing the procedures to determine their behavioral and therapeutic aspects.

Ceramics: 1) To identify the methods, procedures, equipment, tools, and materials commonly used in ceramic activities in occupational therapy, and 2) to demonstrate an acceptable skill in analyzing the behavioral and therapeutic aspects of the procedures and media.

Sewing and Needlecraft: 1) To identify methods, techniques, and media used in needlecraft and sewing activities commonly used in occupational therapy, and 2) to demonstrate an acceptable skill in analyzing an activity to determine its behavioral and therapeutic aspects.

Weaving: 1) To identify methods, techniques, and media used in weaving, knotting, and rugmaking common to most occupational therapy settings, and 2) to demonstrate an acceptable skill in analyzing the procedures to determine their behavioral and therapeutic aspects.

If it is determined that all of the above objectives are an essential part of the course, then each objective should be clarified to specify:

1) who should do the activity (audience),
2) what should be done (behavior),
3) under what circumstances (conditions), and
4) how well or completely (degree)?
   For example, for the activity analysis module above, the overall objective could be restated to read:

Given a number of activities representing a variety of therapeutic media (conditions) the learner (audience) will analyze each activity by describing behaviors usually elicited during the performance of each activity (behavior) to include the following behaviorial domains: (degree)

Phychosocial: Symbolism, ego functions, dyadic and group skills.
Physical: a range of motion. degree of strength and endurance, amount of energy expenditure.
Cognitive: perceiving, recalling, comprehending, applying, analyzing, synthesizing, evaluating.
Perceptual: five senses, balance, perceptual constancy, right-left discrimination.
Motor: gross and fine; eye-hand, two and four extremity coordination.
Cultural: ethnic and class connotations, religious connotations.

Determination of precise behavioral objectives is a difficult task. Some assistance may be found by selecting behaviors from the suggested objectives in each module.

Some educators feel that precise behavioral objectives are limiting to the learner. At any rate, both teacher and learner should know what the learning goals are in any given course.

Clarification of objectives will also point out the need for related learnings. In the above example, the learner will need either prior or simultaneous learning in Normal Human Development, Kinesiology, Normal Human Psychology and Cultural Sociology.

To provide both a guide for writing behaviorial objectives and the context in which the suggested objectives in each module were written, a list of verbs adapted from the Taxonomy of Educational Objectives, Handbook I: The Cognitive Domain, edited by Benjamin Bloom, is presented on page 269.

A CLASSIFICATION OF VERBS RELATED TO A COGNITIVE TAXONOMY

Knowledge - emphasis on recall, specific or universals.

VERBS:

- choose
- define
- identify
- review
- survey
- read
- indicate
- answer question
- label
- list
- locate
- match
- select
- copy
- complete a word, phrase, or statement
- record
- confer (to gain information)
- review (to obtain facts)

Comprehension - emphasis on grasp of meaning, intent, relationships, in oral, written, graphic, non-verbal communication.

VERBS:

- classify
- describe
- estimate
- expand
- explain
- express
- interpret
- measure
- recognize
- suggest
- summarize
- trace
- convert
- compare the importance of
- put in order
- compute
- review to explain

Application - emphasis on applying appropriate principles or generalizations.

VERBS:

- arrange
- apply
- calculate
- construct
- make
- draw
- demonstrate
- differentiate
- discuss
- implement
- coordinate (activities)
- use information, tools
- collect information
- keep records
- perform activity
- plan activity
- prepare
- present
- solve
- compile data
- schedule
- administer test

Analysis - emphasis on breakdown into constitutent parts and of the way they are organized.

VERBS:

- analyze
- debate
- determine
- differentiate
- review to analyze
- form generalizations
- deduce
- draw conclusions
- make inferences
- organize
- interpret relationships

Synthesis - emphasis is on putting elements or parts to form a whole.

VERBS:

- combine and organize
- design
- develop
- coordinate (program design)
- produce
- write (original)
- plan program

Evaluation - emphasis is on values, making qualitative or quantitative judgments with criteria from internal or external sources and with standards.

VERBS:

- make a decision
- evaluate
- compare (and contrast)

b. Estimate the amount of time the course will require. At this point, some estimation of how much time is involved for the "average" learner must be made, in order to make related decisions concerning scheduling and sequencing.

c. Determine teaching strategies and methods. Assistance in this task may be found in Appendix A of this manual. For the above example, a student group activity, using discussion and/or task groups to determine instruments and evaluation design is suggested. Student independent strategy might be used for student reading or literature search.

d. Determine teaching media and resources. Assistance in this task may be found in Appendix C of this manual. The listing is by no means complete. For the example above, the text: Occupational Therapy, edited by H.S. Willard and C.S. Spackman should be useful.

e. Determine evaluation instrument. Assistance in this task may be found in Appendix B of this manual. In the above examples, the evaluation of learning competence would depend upon the thoroughness with which the learner described each item listed in each behavioral domain. Accuracy of description is not required in the above example, nor is a standard of accuracy stated.

No discussion of instructional objectives would be complete without consideration of affective objectives or applications. Integration of feeling with knowledge and skill is essential to satisfactory performance.

4. Affective Applications to Learning Occupational Therapist Skills. The following affective objectives are related to task performance of the occupational therapist in a clinical application setting, but it is assumed that the listed affects will be learned throughout the learner's educational program. As the educator plans curriculum, he should attempt to integrate affective learning with cognitive and psychomotor learning. Therefore, although the following objectives relate to clinical application, related affective objectives must also be included during

the learning of basic information and information-application modules. Their placement and composition depends upon learning sequence, module clustering and the value system of each individual learner.

The affective applications are structured as follows:

1. *Title and definition of affective application. Both of these items are extrapolated from:* Krathwohl, David R.; Bloom, Benjamin S.; and Masia, Bertram B. Taxonomy of Educational Objectives, Handbook II: The Affective Domain, New York: David McKay Company, 1964.
2. *Overall Performance Objective: This item is an explanation of how the affect is related to occupational therapy task performance.*
3. *Suggested Questions Concerning Learner Performance: These items are stated as questions to suggest means by which the teacher and the learner may infer satisfactory task performance. They are not definitive. Many alternative questions are possible.*

Following are a list of ten affective performance objectives, extrapolated from a questionnaire sent to occupational therapy educators and practitioners.

Affective Applications for the Occupational Therapist

a. Affective Application: Awareness: "Sensitization to the existence of certain phenomena and stimuli; that is, that a learner be willing to receive or attend to them."

Overall Performance Objective: The learner will demonstrate an awareness of behaviors and events in:

- screening and observing referred client to determine suitability for intake evaluation and treatment;
- evaluating referred client to determine client's abilities and level of function;
- implementing and coordinating client treatment or training;
- supervising the staff's implementation of treatment or training;
- formulating, coordinating, and implementing a therapeutic plan to guide behavior of clients demonstrating psychosocial dysfunction;
- developing programs to supervise and train clients on a prevocational basis;
- informing, counseling, and consulting with client's family and other health care workers;
- coordinating occupational therapy staff recruitment, selection, orientation, training, and evaluation, and supervising and evaluating occupational therapy student and volunteer performance;
- planning, organizing, and conducting training for assigned volunteers.

Suggested questions concerning learner performance:

1. How does the learner appear to pay attention and describe what he sees?
2. How does the learner attend to multiple stimuli?
3. How does the learner express willingness to observe carefully the behavior or motor activity of clients?
4. How does the learner express interest in the client when he talks with him?
5. How does the learner express interest in the duties, tasks, and skills of his co-workers?
6. How does the learner appear to notice moods of others?

b. Affective Application: Willingness to Receive: "The behavior of being willing to tolerate a given stimulus (and not to avoid it) involving a neutrality or suspended judgment toward the stimulus".

Overall Performance Objective: The learner will display a sensitivity to client values and behaviors in:

- screening and observing referred client to determine suitability for intake evaluation and treatment;
- evaluating referred client to determine client's abilities and levels of function;
- formulating and integrating the goals, nature, and plan of occupational therapy to provide treatment and training according to client's developmental, psychosocial, and physical needs;
- formulating, coordinating, and implementing a therapeutic plan to guide behavior of client demonstrating psychosocial dysfunction;
- formulating, designing, and implementing therapeutic motor activities and orthotic and assistive devices;
- informing, consulting, and counseling with client's family and other health care workers;
- developing programs to supervise and train client on a prevocational basis:
- formulating discharge plans with client treatment team;
- planning, organizing, and conducting training for assigned volunteers;
- consulting with agencies or community committees to propose screening programs and day care facilities which identify and treat problems before extensive care is required and which provide for continuity in treatment;
- planning and developing general activities programs for implementation by a consultee agency in order to assist client before extensive care is required and which provide for continuity in treatment;
- consulting on a continuing basis with a facility or agency to maintain continuous advice and instruction to staff and therapy services to client.

Suggested questions concerning learner performance:

1. Does the learner withhold the formulation of judgments concerning client's skill and abilities levels until he has collected all possible information?
2. Does the learner avoid making value judgments concerning the client's personal, ethical, moral, or religious value system?
3. How does the learner separate his personal feelings concerning client behavior from objective reporting of behavior?

4. How does the learner maintain neutrality of affect when confronted with hostile or acting out behavior?
5. How does the learner express a willingness to include the client as much as possible in planning his therapeutic program?
6. How does the learner express willingness to consider the client's feelings concerning "gadgets" in planning or designing orthotic devices?
7. How does the learner express willingness to adjust his language to adapt to the level of comprehension of the client and his family?
8. How does the learner express a desire to adjust his instructional or teaching methods to the level of client and family comprehension?

c. Affective Application: Willingness to Respond: "The capacity for voluntary action not so much in response to outside prompting as it is a voluntary response from choice".

Overall Performance Objective: The learner will display a willingness to provide service in:

informing individuals and groups outside of a medical establishment about principles and values of occupational therapy.

Suggested questions concerning learner performance:

1. Does the learner assume a responsibility for informing outside individuals about occupational therapy?
2. Does the learner display enthusiasm or indifference at being asked to disseminate information about occupational therapy?
3. Does the learner volunteer for committees, groups, or community agencies which might be able to benefit from his services?

d. Affective Application: Acceptance of a Value: "The emotional acceptance of a proposition or doctrine upon what one implicitly considers adequate ground".

Overall Performance Objective: The learner will display an acceptance of the value of providing service in:

informing, counseling, and consulting with a client's family and other health care workers in a client's home, institution, or community;
organizing and directing occupational therapy services that meet the needs of client and the goals of the establishment;

planning, organizing, and conducting training for assigned volunteers;
informing individuals and groups outside of the medical establishment about the principles and values of occupational therapy;
instructing a consultee agency staff to achieve independent competence in all aspects of an activity program.

Suggested questions concerning learner performance:
1. How does the learner express his agreement with principles of occupational therapy?
2. How does the learner demonstrate his willingness to spend time and effort on the client's behalf?
3. How does the learner demonstrate interest in discussing or explaining occupational therapy services?
4. How does the learner demonstrate a willingness to help volunteers and staff members learn a new skill or activity?
5. Do clients feel that the learner is willing to listen and help?
6. Do staff members feel that the learner is willing to help them with problems?

e. Affective Application: Preference for a Value: "Behavior implies not just the acceptance of a value to the point of being willing to be identified with it, but the demonstration of a committment to the value to pursue it, to seek it out, to want it".

Overall Performance Objective: The learner will examine and select values concerning therapeutic activity in:
formulating and integrating the goals, nature, and place of occupational therapy;
implementing and coordinating client treatment or training by following treatment plan and by consulting with other health specialists to adapt treatment techniques to client's overall program;
supervising the staff's implementation of treatment or training in either an establishment, client's home, or other setting;
formulating, implementing, and coordinating treatment or training programs for client demonstrating developmental or perceptual-motor lag, psychosocial dysfunction, and physical dysfunction;
developing programs to supervise and train client on a prevocational basis;

planning, organizing, and directing in-service education, as requested for an establishment, staff and students;
planning and developing a general activities program for implementation by a consultee agency staff;
instructing consultee agency staff to achieve independent competence in all aspects of an activity program.

Suggested questions concerning learner performance:

1. How does the learner identify his preference for the therapeutic values (as he perceives them) of a number of therapeutic activities for a given client?
2. How does the learner seek out additional information concerning relative values of a given activity?
3. How does the learner identify priorities in formulating treatment plans?
4. How does the learner identify and defend his preference for democratic or autocratic supervisory styles?
5. Does the learner seek out ways and means to implement ideas that he feels are important?

f. Affective Application: Commitment: "The conviction of a belief held or a doubt, and the act of furthering the thing valued in some way, to extend the possibility of developing it, to deepen involvement with it and things representing it".

Overall Performance Objective: The learner will display a commitment to the values of therapeutic activities in:
organizing and participating in local, state, and national conferences and workshops to train health related professions and improve personal competence;
informing individuals and groups outside a medical establishment about the principles and values of occupational therapy;
consulting with agencies or community committees to propose screening programs and day care facilities which identify and treat client problems before extensive care is required and which continues treatment of post-institutionalized client;
planning and developing a general activities program for implementation by a consultee agency.

Suggested questions concerning learner performance:
1. How does the learner demonstrate drive and perseverance in seeking out information related to concepts he values?
2. How does the learner relate concepts he values to his tasks and duties in occupational therapy?
3. Does the learner state or relate values to which he is committed and outline a plan for application of those values as he proposes programs?

g. Affective Application: Conceptualization of a Value: "The comparative evaluation of values after it has been demonstrated that a particular value has emerged".

Overall Performance Objective: The learner will form judgments concerning personal responsibilities in:
- coordinating occupational therapy staff by recruiting, selecting, orienting, training, supervising, and evaluating occupational therapy employees, students, and volunteers;
- organizing and participating in local, state, or national conferences and workshops to train health related professionals and improve personal competence.

Suggested questions concerning learner performance:
1. How does the learner determine priorities of personal responsibility to staff, students, and volunteers?
2. How does the learner demonstrate his personal judgments concerning his involvement in continuing education programs in relation to his other tasks and duties?

h. Affective Application: Organization of a Value System: "Development of a value system to bring together a complex of values, possibly disparate values, and to bring these into an ordered relationship with one another".

Overall Performance Objective: The learner will organize a value system concerning personal responsibilities and therapeutic principles in:
- supervising the staff's implementation of treatment or training in either an establishment, client's home, or other setting;
- organizing and directing occupational therapy services to provide services and materials that meet the needs of client and the goals of an establishment;

coordinating an occupational therapy staff by recruiting, selecting, orienting, training, supervising, and evaluating occupational therapy employees, students, and volunteers;
planning, organizing, coordinating, and administering clinical training programs adapted to student's needs and interests;
planning, organizing, and directing in-service education, as requested, for establishment staff and students;
consulting on a continuing basis with a facility or agency to provide advice and instruction to staff and administration.

Suggested questions concerning learner performance:

1. How does the learner organize his value system concerning his personal responsibilities in developing policies, procedures, and programs?
2. How does the learner identify the value priorities of therapeutic principles in planning for programs?
3. How does the learner weigh or evaluate alternative or disparate values and apply those values to developing in-service education programs?
4. How does the learner delineate his value system to the consultant agency when planning activity programs?

i. Affective Application: Characterization: The development of an ethical code of behavior where the "tendency to act with consideration of others and their ultimate welfare carried out both in terms of the possible effects over a time-span and on any other people who might be concerned, and in terms of a rationally held body of principles as to what constitutes the greatest good for the greatest number", is evident.

Overall Performance Objective: The learner will develop an ethical code of behavior consistent with principles of therapy in:

organizing and directing an occupational therapy service to provide services and materials that meet the needs of clients and the goals of an establishment;
coordinating occupational therapy staff by recruiting, selecting, orienting, training, supervising, and evaluating occupational therapy employees, students, and volunteers;

planning, organizing, coordinating, and administering clinical training programs adapted to student's needs and interests;

informing individuals and groups outside of establishment about principles and values of occupational therapy.

Suggested questions concerning learner performance:

1. How does the learner organize and defend ethical priorities and determine a personal code of ethics?
2. How does the learner demonstrate and apply his personal ethical code?
3. How does the learner state his value hierarchy concerning the effect of his actions on clients and staff members?
4. Does the learner react according to a commonly held code of ethics when others challenge him?
5. How does the learner observe the "confidentiality" of information concerning staff and clients?

j. Affective Application: Development of Generalized Set: The way an individual "approaches a problem determines what he will see as important in it, delimits the things which he will take into account in attempting to find a solution and determine the tenacity with which he clings to the initial perception of the problem."[12]

Overall Performance Objective: The learner will demonstrate a readiness to revise judgments and change behavior in light of evidence in:

implementing and coordinating client treatment or training by following treatment plan in consulting with other specialists, in adapt treatment techniques to client's overall program, in analyzing client progress, and in evaluating treatment and modifying treatment plan;

supervising the staff's implementation of treatment or training in either establishment, client's home, or other setting;

formulating, coordinating, and implementing a therapeutic plan to guide behavior of client demonstrating psychosocial dysfunction;

conferring with establishment staff by written or verbal communication to coordinate occupational therapy services with other establishment programs;

organize and participating in local, state, or national conferences and workshops to train health related professionals and improve personal competence;

implementing research projects as a team member by collaborating to develop hypotheses and research designs;

consulting on a continuing basis with a facility or agency to provide advice and instruction to staff and administration;

coordinating data collection and reviewing data surveys concerning health care and services within the community to determine extent of consultee service needs.

Suggested questions concerning learner performance:

1. How does the learner demonstrate a readiness to listen and consider a viewpoint opposite from his own?
2. How does the learner delineate his value commitment priorities when he must defend his point of view?
3. How does the learner demonstrate flexibility in accepting a decision or point of view opposite to his when evidence and discussion have determined an opposite course of action?
4. How does the learner demonstrate a readiness to continuously evaluate client progress, to revise and adapt treatment plans on the basis of new evidence?
5. How does the learner state his theoretical assumptions and biases in his approach to a problem?

PREPARATION FOR OCCUPATIONAL THERAPIST

BASIC INFORMATION MODULE

1. Introduction to Occupational Therapy: Overview of the profession, it's function and it's educational requirements.

Overall Performance Objective: 1) To define and explain the profession of occupational therapy, 2) to describe types of services provided to clients, 3) to identify and discuss theories of occupational therapy, 4) to identify and describe worker activities in occupational therapy, 5) to differentiate between aide, technician, therapist, and consultant responsibilities, 6) to compare and contrast occupational therapy services with those of other health professions, 7) to trace the evolution of occupational therapy from its inception to the present, and 8) to identify, discuss, and analyze the knowledges, skills and attitudes required for competent performance in a variety of worker activities.

Related Activities in Occupational Therapy: To comprehend the rationale for and plan his own professional training; be able to apply principles of occupational therapy to client care and administrative activities; and inform other individuals and groups about principles and values of occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the terms "Occupational Therapist" and "Occupational Therapy".	AOTA definition, description of functions, etc.
2. Identify and state the kinds of service provided by occupational therapy.	Occupational Therapy provides service to those individuals whose abilities to cope with tasks of living are threatened or impaired by developmental deficits, the aging process, poverty and cultural differences, physical injury or illness, psychosocial and social immaturity.
3. Explain the primary focus of occupational therapy service.	Develop adaptive skills and performance capacity.
4. Explain the practical concepts upon which occupational therapy is based.	Activities are a primary agent for learning. Activities allow exploration of interests, needs, capacities and limitations.

	Activity represents or reflects life work situations and is thus a vehicle for skill development. When activities are matched to developmental needs and interests, they provide intrinsic gratification and satisfaction.
5. Describe and give examples of types of occupational therapy programs usually found in various health facilities.	Prevention and health maintence, remedial programs, daily life task and vocational adjustment programs, etc.
6. List and describe the overall service functions of occupational therapy usually performed in various health facilities.	1. Evaluate physical and psychosocial capacities. 2. Define needs. 3. Select appropriate task or experience. 4. Facilitate, influence or implement client participation. 5. Evaluate client response. 6. Validate assessments, share findings, etc.
7. Identify current and future worker levels in occupational therapy as discussed in the literature of occupational therapy.	Aide, assistant, technician, therapist, master clinician, consultant, etc.
8. Given examples of occupational therapy task or duties, describe each level role performance in that task.	Task example: Evaluation of client capabilities. Examples of duties: aide: readies area. technician: administers routine evaluations. therapist: selects, administers non-routine evaluations, analyzes evaluation findings, supervises technician and aide. consultant: researches and standardizes evaluation techniques.
9. Compare, contrast, and differentiate between levels of worker function.	Levels: aide - assists technician - implements therapist - plans and supervises. consultant - researches and plans programs.

10. Define the term "rehabilitation".	Philosophy of recovering from disease or handicap by the whole person - includes return to optimal physical, psychosocial, and vocational function.
11. Define the terms "rehabilitation team" and "rehabilitation services".	Rehabilitation Team - a client-oriented group of specialists who plan a rehabilitation program with client and coordinate its implementation.
12. Identify and describe the functions of a given list of rehabilitation disciplines.	Physician, nurse, psychiatrist, physical therapist, social worker, administrator, etc.
13. Explore and discuss his perceptions of relationships between other disciplines and occupational therapy.	The need for coordinated communication, etc.
14. Define a given list of terms frequently used to delineate the credentialing and status of health care professions.	Aide, technician, therapist, registration, certification, licensure, professional, para-professional, supportive, etc.
15. List standards or ethical behavior practices by all health care professions.	Confidentiality of client communication, mutual respect for other professions, responsibility for client welfare, etc.
16. Identify significant events in the history of occupational therapy by tracing the development of the profession from the inception of the name to the present day.	Development as a profession, establishment of AOTA, establishment of credentialing and education mechanism, etc.
17. Explore and discuss his perceptions of his future role in the health care profession.	

18. Given a copy of the educational program planned for him, identify the specific parts of his educational preparation for performance as an Occupational Therapist, and discuss his perceptions of the purpose of each of these parts.

Information (knowledge), application (skills), and experience (clinical practice).

19. Given a copy of the educational program, identify those performances or knowledges in which he is personally competent, and demonstrate his competency by performing specified tasks or by demonstrating comprehension of facts.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
VT: 18, p. C-21
F: 45, p. C-37; 95, p. C-47; 107, p. C-49; 112, p. C-50; 117, p. C-51; 121, p. C-52
References, p. C-97

2. Normal Human Development: Details of developmental phases, components, interdependencies and interrelationships.

Overall Performance Objective: 1) To identify and describe the major life phases and life tasks in the human developmental continuum from birth through death, 2) to identify the sequence of developmental milestones in the biogenetic, cognitive-perceptual-motor, social and cultural process, 3) to identify critical developmental periods and potential intrinsic and extrinsic interruptive factors, 4) to compare and contrast the interrelationships between developmental behaviors, developmental components and 5) to analyze the meaning of work and leisure time behaviors.

Related Activities in Occupational Therapy: To comprehend the behavioral sciences; be able to observe and evaluate the client's level of psychomotor, affective, social and cognitive development, formulate and plan therapy program to stimulate or facilitate developmental function in all components; and assist in planning developmental screening and preventive health care programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify the components of processes of normal human development and describe each.	Components of Development: Biogenetic or Neurophysiological, Cognitive-Perceptual-Motor, Social, Cultural, etc.
2. Identify the major life phases, and describe the age range of each.	Prenatal - early childhood 0 - 5 years, childhood: 5 - 12 years, adolescence: 12 - 21 years, adulthood: 21 - 40 years, middle age: 40 - 60 years, late maturity: 60 - on, etc.
3. For each life phase, describe in detail the sequence of life tasks or developmental milestones within each developmental component.	Early childhood: Biogenetic: development and maturation of neuromuscular system. C.-P.-M.: development of gross and fine motor skills, perceptual constancy, concepts. Social: development of trust, mistrust, love, speech. Cultural: development of values of right and wrong; knowledge of and compliance with cultural expectations, etc.

4.	Define the term "developmental readiness".	
5.	Discuss and analyze the interrelationships between developmental processes or components.	The child cannot attain the enculturation skill of toilet training until he has neurological control, has motor skills, can understand the idea, can relate to and wants to please the parent, etc.
6.	Identify critical developmental periods, and identify and describe critical needs during that period.	Adolescence: identity crisis - needs freedom to explore, firm limits when he goes beyond social or cultural acceptance, etc.
7.	Identify intrinsic and extrinsic potential interruptive influences in each critical developmental phase.	Adulthood: intrinsic - unable to have children, physically disabled, etc. extrinsic - not allowed to adopt children, no work available, etc. Senescence intrinsic - is approaching death, etc. extrinsic - is not allowed to talk about it, etc.
8.	Define the terms "work" and "play".	Work - tasks or activities which have a valued product. Play - tasks or activities which have a valued process.
9.	Trace and discuss the evolution of "work behavior" and "play behavior" from birth through death.	"Play is a child's work"; work and play are synonmous in infancy, but the desire to create or make a valued product begins early and eventually evolves into adolescent vocational choice.
10.	Discuss and contrast man's need for work and recreation.	Work - gives us cultural value to others. Recreation - literally when we can re-create and express ourselves.

11. Describe the meaning of balance between leisure and work.	Both are needed; how much of each depends upon the individual; what is work to one may be play to another; etc.
12. Trace and analyze the development of group behavior by discussing group ages.	From child-parent interaction to parallel play to group play competition, to mature interdependent, etc.
13. Examine and analyze the meaning of various groups at each life phase.	Family group: childhood - dependent adolescence - independent adulthood - interdependent senescence - may again be dependent Peer group: important in adolescence and adulthood, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
T: 2 & 3, p. C-5; 4 & 5, p. C-6
PI: 21, p. C-11
F: 6, p. C-28; 33, 34 & 35, p. C-34; 59 & 60, p. C-40
84, 85 & 86, p. C-45; 104, p. C-49; 110, p. C-50
References, p. C-97

3. Cultural Sociology: Overview of the impact of culture on human development.

Overall Performance Objective: 1) To identify, describe and discuss the effects of culture on human behavior, 2) to identify and classify major ethnic, socioeconomic and minority group life styles, and 3) to discuss the impact of cultural deprivation on normal development.

Related Activities in Occupational Therapy: To comprehend psychosocial pathologies and health care concepts and to analyze client behavior patterns; analyze effects of home, physical, and psychosocial environment on client's ability to benefit from therapy; design treatment plan within client's cultural interests; aid client's adjustment to instititional environment and continuance of normal developmental patterns; guide client in coping with his environment after he leaves therapy; consult with community action committees; and gather and analyze data concerning health care services.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define given terms relevant to the "culture concept".	Socio-economic, socio-cultural, culture, group sub-culture, ethnic, minority, cultural bias, taboo, etc.
2. Identify and describe the continuum of social units.	Family, extended family, tribe, nation, race, etc.
3, Describe the concept of "family" by identifying the components in a "family unit" and "extended family".	The nuclear family usually contains the parent and their children in a closely related situation. The extended family contains both secondary and primary family members.
4. Identify, describe, and discuss the influence of the family on individuals' behaviors at each life stage.	Childhood: primary influence. Adolescence: ambivalence between family and peer pressures. Adulthood: community and peer pressures. Aging: family influence very strong - role reversed between parent and child.

5. Explore the influence of culture on family life and the family's influence on culture.	Why are there two universal taboos - incest and matricide or patricide? How is the family changing? What influences did your family have on your values: what influence will your client's families have on clients?
6. Compare and contrast life styles and value systems which may influence planning for and response to occupational therapy.	Family unit and extended family attitudes, self-identity, child rearing, vocational choice, attitudes towards society, work vs. recreational needs, etc.
7. Identify ethnic and cultural groups in the United States.	Polish, Irish, Italian, German, Jewish, etc.
8. Identify commonly recognized racial groups in the United States.	Indian, Caucusian, Negro, Mongolian, etc.
9. Explain his perceptions of what a minority group is and discuss why and when ethnic groups can be considered a minority group.	
10. Identify socio-economic classifications and describe given factors about each.	Classifications: Upper, upper-middle, middle-middle, lower-middle, lower, etc. Factors include: Relative income, occupational groups, housing, general educational level, ethnic and minority representation, etc.
11. Define the term "stereotype", give examples of commonly used stereotype statements, and discuss their relative validity.	Stereotypic examples: "Blacks have a natural sense of rhythm", "dumb pollock", "wild indian", "free, white and twenty-one", "all Italians are Catholic", "welfare personality", etc.

12. Identify and discuss common economic, social, and attitudinal conflicts prevelent in american society.	Racial, class, age conflicts.
13. Explore and identify his perceptions of his personal ethnic and socio-economic life styles and attitudes.	
14. Analyze and discuss his own cultural biases and their perceived effects on the attitudes of others.	
15. Explore and discuss the effects of other individual's perceived cultural biases upon his own behavior.	
16. Define the term "cultural deprivation".	A poverty or lack of environmental stimulation.
17. Identify intrinsic and extrinsic means by which an individual may be culturally deprived.	Intrinsic: physical or psychic disability. Extrinsic: environmental paucity of material goods, emotional stimulation, health care, etc.
18. Identify and describe the impact of cultural deprivation on each component or process of human development.	Biogenetic, cognitive-perceptual-motor and social immaturities.
19. Identify and describe the impact of public attitude of physically disabled individuals.	Social acceptability, education, employability.
20. Describe public attitude toward a variety of physical disabilities.	Blind, epileptic, crippled children, crippled adults, deaf, etc.
21. Identify and describe poverty groups in the United States.	Rural: appalachian, Indians, etc. Metropolitan Ghetto: blacks, Mexican, Puerto Rican, etc.
22. Identify and describe commonly recognized attitudes and values of poverty groups.	Apathy, hostility, futility, etc.

23. Describe and discuss some efforts for and conflicts in dealing with extrinsic cultural deprivation in the United States.	Poverty Programs - questions concerning effectiveness. "Welfare State" controversy, Head Start programs, etc.

Suggested Teaching Strategy:
- Student-Student Group, p. A-7
- Student Independent, p. A-8
- Direct Communication, p. A-5

Suggested Evaluation:
- Matching, p. B-9
- Completion, p. B-10
- Essay, p. B-11
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- G&S: 1-4, p. C-7
- PI: 40, p. C-15
- F: 11, p. C-29; 13 & 17, p. C-30; 28, p. C-33; 38, p. C-35; 44, p. C-37; 57, p. C-39; 75, p. C-43; 77, p. C-44; 96, p. C-47; 101, p. C-48
- References, p. C-103

PREPARATION FOR OCCUPATIONAL THERAPIST

BASIC-INFORMATION MODULE

4. Normal Human Psychology: Overview of theory, inter- and intra-psychic dynamics, and relationships between psychic and physiological function.

Overall Performance Objective: 1) To explain and differentiate among selected psychological theorists, 2) to identify and describe normal adult intra-psychic and extra-psychic dynamics, 3) to classify and discuss the inter-relationships between physiological and psychological functions, and 4) to describe and discuss theories of learning.

Related Activities in Occupational Therapy: To comprehend culture and communication concepts, psychosocial pathologies and be able to evaluate client's inter-personal skills; design and implement therapeutic programs; implement therapeutic interventions to modify behavior; guide client in constructive self-expression; coordinate activities for client to develop interpersonal skills; guide client to become task and work-oriented; and apply supervisory skills to client and staff.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify, and describe theoretical approaches to the study of psychology.	Psychoanalytic Theory: Freud, Jung, Adler, etc. Behavioralist Theory: Watson Skinner. Developmental Theory: Gesell, Erickson, Havinghurst. Interpersonal Theory: Sullivan, Berne, Harris.
2. Compare and contrast similarities and differences between theoretical approaches.	
3. Identify and describe terms related to intra-psychic dynamics.	Psychic structure, defense mechanisms, stimulus-response mechanisms, emotional components, personality, etc.
4. Identify the components of psychic structure, define them and describe their developmental continuum.	ID, ego, super-ego, unconscious, preconscious, conscious.
5. Define the term "drive" and describe the two basic drives.	Agressive, pleasure, etc.

6. Identify and describe normal defense mechanisms and explain their dynamics.	Rationalization, projection, sublimation, etc.
7. Identify and describe stimulus-response mechanisms related to behavioralist theory and explain how they may occur in human beings.	Approach - approach, approach-avoidance, avoidance - avoidance, etc.
8. Define the term "emotion", describe given emotions and describe the dynamics of each.	Love, fear, hate, anger, anxiety, etc.
9. Define and discuss the term "attitude", describe given attitudes or sets and explain how attitudes are learned.	Hostility, suspicion, trust, etc.
10. Explain the phenomonon of conflict and describe terms related to it.	Conflict, ambivalence, etc.
11. Define the term "personality", describe and discuss theories of personality, compare and contrast similarities and differences in approach.	Freud, Fromm, Lewin, Allport, Sheldon, Rogers, etc.
12. Define the term "ego function", list given ego functions and describe each.	Reality testing, judgments, sense of reality, regulation and control of drives, object relations, etc.
13. Define the term "dyadic relationship", give examples and descriptions of each type of relationship.	Child, parent, adult, and combinations.
14. Describe a given number of roles an individual may assume in a group and explain how these may fluctuate and change.	Constructive: Imitator, information seeker, opinion giver, coordinator, orientor, encourager, haromonizer, etc. Destructive: aggressor, blocker, recognition seeker, playboy, dominator, help-seeker.

15. Identify and describe the impact or effects of psychic dynamics on physiological function and vice versa, discuss the interrelationships between them, and give examples.	Effects of perception on response, effects of emotion on autonomic nervous system, effects of fatigue on emotion, etc.
16. Outline the term "perception", describe the sensory input systems of the human body, and discuss their interrelatedness.	Vision, hearing, balance, position sense, tactile discrimination, etc.
17. Define the term "intelligence", describe the process of mental development which occurs in normal individuals, and list and describe methods by which intelligence is measured.	Mental Development: differentiation, integration, maturation, learning. Measures: verbal, perceptual, conceptual, etc.
18. Identify and describe given approaches to learning theory, compare and contrast similarities and differences between them, analyze and discuss their applications to occupational therapy.	Skinner, Montessori, Piaget, Gagne, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 2, p. C-8; 8, p. C-9; 19, p. C-11; 33, p. C-14
References, p. C-104

5. Communication: Overview of communication theory and methods, with applications in person-to-person verbal communication.

Overall Performance Objective: 1) To identify and describe theories of communication, 2) to list and explain formal and informal methods of verbal and non-verbal communication, and 3) to identify and apply person-to-person communication techniques.

Related Activities in Occupational Therapy: To observe and analyze client's communication skills; formulate treatment objectives for improving communication skills; apply instructional methods; confer with and counsel clients, their families, and staff; compose records, reports, and correspondence; supervise staff, and coordinate client and staff activities; consult with other health care workers; and receive instruction to maintain and upgrade personal skills.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "communication".	Recognition and understanding of symbols, etc.
2. Discuss the need for and intent of communication.	To affect and control behavior, change and affect behavior under varying conditions, etc.
3. Recognize and describe the processes of communication.	Models: Berio, Schramm, Shannon-Weaver, Johnson.
4. Identify channels of formal and informal communication commonly used in the health care system, and give examples of each.	Formal - structured: Written - memos, letters, policy, client records. Oral - lectures, interviewing and oral examinations. Informal: Written - notes, schedules, etc. Oral - team conferences, staff meetings. Non-verbal - facial expressions, body postures, gestures.

5. Define the term "written communication", describe and compare the importance of the functions and purposes of types of formal written communication commonly used in health care systems. List and describe examples commonly used in health care systems, and describe potential audiences and purposes for each example.	Definition: systematic sets of symbols in varying forms. Examples: record, reports, contracts, policy statements, program objectives, teaching pamplets, etc. Audiences: staff, clients, students, etc. Purposes: education, information, etc.
6. Describe and compare the importance of the functions and purposes of given types of consummatory and instrumental communication.	Consummatory: libraries, teaching machines, etc. Instrumental: mediatorial devices, non-verbal methods, examinations, etc.
7. Identify non-verbal behavior cues usually given by individuals involved in communication and suggest the meaning of each as it relates to human feelings.	Facial expressions to indicate expressive behavior such as anger, disgust, etc. Body language to indicate interest, attack, disinterest, anxiety, etc.
8. Identify and describe the dynamics of a conversation between two individuals.	Concepts of: empathy, connotative and denotative meaning.
9. Identify and describe behaviors involved in listening and receiving information and apply this to a given situation.	Taking notes, asking questions, avoiding value judgments, emotional detachment, etc.
10. Demonstrate the ability to listen and extrapolate information in a given situation.	Listening to a lecture or statement and reporting essential parts.
11. Given a verbal or written list of directions, identify and organize the steps and perform or report the steps in order.	Directions for going to another place. Directions for drawing an unseen figure.
12. Identify a method for giving directions and apply this method in a given situation.	Identify key steps, breaking activity down into small units, using clear and understandable language, asking if individual understands, etc.

13. Identify dynamics and behaviors apparent in non-verbal and verbal reinforcement and apply these to a given situation.	Dynamics: transference and counter-transference, etc. Verbal Reinforcement: "good", "right", "almost right", etc. Non-verbal: smiles, head nods, attentive leaning towards, etc.
14. Define the term "influence", state some techniques which may be used to persuade and apply these to a given situation.	Influence: to induce, to believe, to convince. Techniques: reinforcement, pointing out positive benefits, being personally enthusiastic, etc.
15. Define the term "negotiation", identify the dynamics of negotiating, and apply negotiation techniques to a given situation.	Negotiation: mutual discussion or arrangement of the terms of a transaction or agreement. Dynamics: development of role patterns; allocation of authority; understanding of differences in norms, values and beliefs; etc. Techniques: identifying items to be negotiated through discussion; determining alternatives; making mutual concessions; settlement; etc.
16. Identify and describe methods of response in interviewing to obtain information and demonstrate an acceptable skill in applying this technique to a given situation.	Evaluative, hostile, reassurring, probing, etc.
17. Identify and describe methods of giving a talk or lecture and apply them to speak about a subject before a given group.	Knowing the audience's interests and needs, organizing the material, using language and manner which makes the audience comfortable, speaking clearly and slowly, asking for feedback, etc.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

G & S: 3, p. C-8
PI: 16, p. C-10
F: 24, p. C-32; 63, p. C-42; 97, p. C-47
References, p. C-105

6. Medical Terminology: Terms and phrases related to physical and psychosocial problems and treatment of clients commonly seen in occupational therapy services.

Overall Performance Objective: 1) To identify resources for definitions of medical terms, 2) to identify and translate commonly used prefixes, suffixes, root words, adjectives, and medical abbreviations.

Related Activities in Occupational Therapy: To gather and exchange information concerning client; observe and report treatment; and comprehend materials and texts related to health care.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify commonly available resources which explain or define medical terminology.	Medical dictionaries, medical terminology instruction manuals, medical abbreviation dictionaries, word lists, etc.
2. Define and correctly spell a given list of Latin and Greek prefixes commonly used in the health care situations.	a or ab = without or away from ad = to anti = against or before di = two pre = before
3. Define and correctly spell a list of Latin and Greek suffixes commonly used in health care situations.	itis = inflamation of phelia = disease of otomy = removal or cutting into ostomy = removal of part of oma = malignancy of
4. Define and correctly spell a list of Latin and Greek root words commonly used in health care situations.	plegia = paralysis paresis = partial paralysis or weakness phobia = fear ego = I
5. Define and correctly spell a list of Latin or Greek adjectives commonly used in health care situations.	proximal = near septic = containing bacteria ventral = front micro = small macro = large

6. Given a list of medical terms which combine Latin or Greek prefixes, root words, and suffixes, translate them into English.	hemiplegia = paralysis of half trachotomy = cutting into the trachea
7. Given a list of English meanings, construct the appropriate Latin or Greek term.	death of tissue = necrosis inflammation of the joint = arthritis
8. Given a list of commonly used medical abbreviations, state their English meaning.	QID = 4 times a day PRN = as needed NPO = nothing by mouth

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Matching, p. B-9
List, p. B-11

Suggested Resources:
PI: 24, p. C-12; 34, p. C-14
References, p. C-106

7. Normal Human Physical Structure and Function: Basic structures and systems of the human body and the interrelationship between systemic functions.

Overall Performance Objective: 1) To identify the basic structural organization of the human body, 2) to apply accepted anatomical terminology and identify the basic organ systems of the body, and 3) to indicate the normal overall functions of each structure and system and explain the primary interrelationships between systemic functions.

Related Activities in Occupational Therapy: To read and study texts, periodicals, and manuals related to human pathology; comprehend neurophysiological concepts and functional anatomy; gather relevant information concerning client; compose treatment plans; instruct client in activity; observe and report client's physical condition; adjust or modify treatment; modify self-help or assistive devices; and direct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and define the basic structural organization of the body.	Cell, tissue, organ, etc.
2. Describe the interrelationships between the above.	Tissue is a group of specialized cells, and an organ is a group of specialized tissues to perform a given function.
3. Define commonly used terms to indicate position or location.	Superior, inferior, anterior, posterior, ventral, dorsal, etc.
4. Identify body planes.	Longitudinal, horizontal, vertical, etc.
5. Identify body cavities.	Thoracic, peritoneal, etc.
6. Identify body sections.	Sagital, frontal, etc.
7. Identify and name types of tissue.	Epithelial, bone, muscle, nervous, etc.
8. Explain normal tissue function of each type of tissue.	Epithelial: organ covering Bone: body support Muscle: contracts for motion

9. Name every major body organ.	Heart, lung, kidney, etc.
10. State what function each organ has by itself.	Heart pumps blood; kidney cleans blood; etc.
11. Define the term "system" as it relates to human body function.	System: a group of organs or organ parts concerned with a body function.
12. Identify each major organ system of the body.	Cardio-vascular, gastro-intestinal, gastro-urinary, etc.
13. Identify the major organs involved in each system.	Cardio-vascular: heart, veins, blood, etc.
14. State approximately where each organ is located in the body (see above) and what are its physical characteristics.	Size, shape, contour, etc.
15. State what each organ does within a given system.	
16. State how each organ's function is dependent upon other organs within that system.	
17. Recognize the relationships between organ systems.	Control of the cardio-vascular system by the nervous systems. The interrelations between the cardio-vascular system and the digestive system. The sharing of organs and tissues between cardio-vascular and genital-urinary systems; etc.
18. Recognize the relationship of organ systems and normal human function.	Movement cannot occur without bones for support, muscles for power and nerves for stimulus and control. Body temperature cannot be maintained without the cardio-vascular system, the skin and autonomic nervous system, etc.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Student-Student Group, p. A-7

Suggested Evaluation:

Matching, p. B-9
Essay, p. B-11
List, p. B-11

Suggested Resources:

PI: 4 & 5, p. C-8; 9, p. C-9; 22, p. C-11; 26, p. C-12
S: 14, p. C-17
F: 49, p. C-38; 88, p. C-46; 118, p. C-51
References, p. C-106

8. Gross Human Anatomy: Description and dissection of the muscular system, related nerves, connective tissue, bone and joint structures.

Overall Performance Objective: 1) To identify, recognize and name the major muscles and muscle groups of the human body, including their location, general size and shape, origin, insertion, innervation and vascular supply, 2) to describe the major action of each muscle or muscle group, 3) to identify, recognize and name major joints of the human body, and 4) to describe, recognize and name major parts of the human nervous system.

Related Activities in Occupational Therapy: To comprehend neurophysiological and kinesiological concepts; observe and evaluate client's level of function; plan and implement occupational therapy for physical disabilities; and direct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and define basic terminology related to gross anatomy.	Muscle, muscle group, origin, insertion, joint actions, connective tissue, bones, etc.
2. Identify and describe types of connective tissue.	Tendon, ligament, fascia, etc.
3. Explain given embryological concepts.	Early different formation of basic body plan. Differentiation of somite and neural plate, etc.
4. Identify, recognize and describe gross structures of the back and neck.	Deep and superficial muscles of neck, thorax and back, their innervation, origin, insertion and location, spinal cord, brachial plexis, vertebral joints, etc.
5. Analyze motions of the trunk and neck to determine individual and muscle group action.	Forward flexion of neck, etc.
6. Identify and describe gross structures of the pectoral girdle and shoulder.	Deep and superficial, extrinsic and intrinsic musculature joints, etc.

7. Analyze motions of the pectoral girdle and shoulder to determine individual and muscle group action.	Elevation and depression of the clavicles, etc.
8. Identify and describe gross structures of the arm, forearm, and hand.	Musculature, joints, blood supply, terminal nerves of the brachial plexis, etc.
9. Analyze the motions of the joints, forearm and hand to determine individual and group muscle action.	Elbow flexion, extension, wrist radial deviation, flexion, finger motions, etc.
10. Identify and describe the gross structures of the face and cranial cavity.	Musculature, brain, cranial nerves, sense organs of the head, etc.
11. Identify and describe the gross structures of the thorax.	Musculature, rib cage, etc.
12. Identify and describe the gross structures of the abdomen.	Musculature action, etc.
13. Identify and describe the gross structures of the pelvis and hip joint.	Musculature, limbo-sacral plexis, major vessels, etc.
14. Identify and describe the gross structures of the leg and foot.	Musculature, knee joint, joints and arches of foot, terminal nerves of limbo-sacral plexis, blood supply, etc.
15. Analyze the motions of the joints of the lower extremity to determine individual and group muscle action.	Knee extension, etc.

Suggested Teaching Strategy:
Direct Communication p. A-5
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

T: 1, p. C-5
PI: 4 & 5, p. C-8
F: 68, p. C-42
References, p. C-106

9. Human Neuroanatomy and Neurophysiology: An overview of structures and functions of the nervous system.

Overall Performance Objective: 1) To identify and describe the general morphology, function, composition and organization of the nervous system, 2) to describe, differentiate between, and compare and contrast peripheral and central nervous system structures and functions, 3) to describe and compare sensory and motor systems and functions, and 4) to identify and describe the effects of lesions in given areas of the nervous system.

Related Activities in Occupational Therapy: To be able to comprehend and recognize (not diagnose) clinical neurological conditions; gather appropriate data concerning client; select and implement appropriate evaluations; determine a plan of occupational therapy for individuals with neurological deficits or dysfunction; and direct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Recognize and describe the overall morphology and function of the nervous system.	Morphology: nerve cell, central nervous system, brain, spinal cord, peripheral nervous system, cranial and spinal nerves, sense organs, etc. Function: receive and respond to stimuli, control body function, etc.
2. Identify the compositional parts of the nervous system and describe the function of each.	Nerve cell, neuron afferent and efferent conduction, synaptic junction, brain, midbrain meninges and related spaces, ventricular systems, etc.
3. Describe the components of the peripheral nervous system and the functions of each.	Cranial and spinal nerves, autonomic nervous system, synaptic junctions, etc.
4. Describe the histology of the neuron and the physiological processes which take place.	Nerve fibers, bundles, coverings, nerve conduction, degeneration and regeneration, peripheral vs. segmental innervation, etc.

5.	Identify and describe the structure and function of the synaptic junction and the neuromuscular junction.	Terminal bouton, transfer of stimuli, motor end plate, transfer of impulse to muscle spindle, etc.
6.	Describe the origin and organization of the autonomic nervous system and explain its functions in relation to the voluntary nervous system.	Arises from cranial and spinal nerves and ganglia; organized into plexes, functions as an excititory or inhibitory agent to the autonomic functions, etc.
7.	Describe the components of the central nervous system and the functions of each.	Spinal cord: reflex control, transmission of stimuli to higher centers, brain stem, diencephalon, cortex, basal ganglia, cerebellum, cranial nerves, etc.
8.	For each CNS component, describe the structure and its individual and related function to the nervous system.	Cortex: white matter, gray matter, sulci, highest center of control, center of intellectual function, etc.
9.	Identify the components of the sensory systems.	Organs of balance, hearing, vision, position sense, etc.
10.	Identify and describe the structure of the major sense organs and describe how each sensory system functions.	Vision, hearing, balance, proprioception, etc. Vision: structure and function of the eye, optic nerve, synaptic junctions, vision center in the brain. How are images transmitted? Perceived? Etc.
11.	Identify and describe the components and functions of given motor pathways.	From central nervous system to peripheral nervous system to myoneural junction.
12.	Describe the dynamics of motor response.	Reflex and conditioned response, cognitive motion, muscle tone, posture, etc.
13.	Identify the interrelationship between sensory and motor systems and give examples of each.	Systems are interdependent - one doesn't duck a baseball if one doesn't see it; one is awkward without sense of position in space, etc.

14.	Given the problem of tracing an impulse from sense organ to myoneural junction, apply knowledge of neuroanatomy to trace the nerve pathway.	Withdrawal of index finger from hot iron - perception of pressure on ischial tuberosities, etc.
15.	Identify the effects of nerve lesions in given locations on human function.	Upper motor neuron, lower motor neuron, spinal cord, internal capsule, basal ganglia, cerebellum, cerebral cortex, optic disk or nerve, auditory nerve, etc.

Suggested Teaching Strategy:
Direct Communication, p. A-5
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11

Suggested Resources:
PI: 27, p. C-12; 28 & 29, p. C-13
F: 69, p. C-42
References, p. C-107

PREPARATION FOR OCCUPATIONAL THERAPIST

BASIC INFORMATION MODULE

10. Functional Anatomy and Kinesiology: An overview of mechanics of the body, muscle contractions and resultant motions, with recognition of selected pathological signs of motor dysfunction.

Overall Performance Objective: 1) To recall and describe principles underlying and the mechanics of human motion, 2) to identify integrations of muscle contraction and its movement, 3) to recognize common pathological signs of motor dysfunction, and 4) to demonstrate an acceptable skill in observing and analyzing specific muscle and joint actions.

Related Activities in Occupational Therapy: To comprehend physical pathologies; evaluate level of motor and perceptual motor ability; plan therapeutic motor activities for clients with physical dysfunction; and direct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe given mechanical principles.	Levers, lever systems, power systems, power sources, etc.
2. Describe the mechanics of joints and muscles.	Type(s) of levers, power source, action and grades of action of muscles on joints and joint action, etc.
3. Describe the physical properties of bones, muscles, tendons and ligaments; state how those properties influence motion.	Interrelationships between degree of elasticity, shape, surface structures, etc., and body mechanics.
4. Describe the mechanics of the vertebral column.	Muscles involved, joint actions, motions, etc.
5. Describe the mechanics of the trunk and respiration.	Trunk motions and specific musculature mechanics of breathing, action of specific muscles on respiration, etc.
6. Demonstrate an acceptable skill in observing, palpitating, and analyzing muscle and joint action of the trunk.	Lateral movement of thorax; sternal motion, etc.

7.	Describe the mechanics of the shoulder girdle, shoulder joint, elbow, forearm and wrist.	Specific musculature and joint actions, etc.
8.	Demonstrate an acceptable skill in observing, palpitating, and analyzing specific joint and muscle actions of the shoulder girdle.	
9.	Describe the mechanics of the hand.	Muscles, bones, joints, tendons and ligaments involved.
10.	Demonstrate an acceptable skill in observing, palpatating, and analyzing specific joint and muscle action of the hand.	
11.	Describe and recognize specific pathologic dysfunctions of the hand.	Specific denervations; joint deformities, etc.
12.	Analyze the upper extremity motions, musculature, and innervations required to perform common activities of daily living.	Buttoning a button, combing hair, lifting a child, using a screw driver, etc.
13.	Given specific neuromuscular losses, analyze the remaining neuromuscular components to determine possible substitute motions.	Substitutions for supination - pronation, substitutions for opposition, etc.
14.	Describe the mechanics of the hip, knee, foot and ankle.	Specific musculature and joint actions.
15.	Demonstrate an acceptable skill in observing, palpating, and analyzing specific joint and muscle actions of the lower extremity.	
16.	Identify and describe the mechanics of posture and gait.	Reflexology, specific musculature and joint actions.
17.	Demonstrate an acceptable skill in analyzing and observing gait mechanics.	Velocity, step length, cadence muscle activity, ground reaction forces, knee displacements, etc.

18. Demonstrate an acceptable skill in recognizing and analyzing the motor dynamics of pathological gaits.	Wide base gait, inverted flat foot, no knee flexion, lateral trunk bending, foot slap, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 36, p. C-35; 64, 65 & 69, p. C-42
References, p. C-107

11. Health Care Systems Resources and Issues: An overview of consumer resources for health care and current issues in health care.

Overall Performance Objective: 1) To identify, classify and describe health care delivery systems in the United States, 2) to identify and describe roles and functions of medical and allied health professions and technologies, 3) to explain how each type of health care may be obtained by the consumer, 4) to discuss methods of funding or payment for health care, 5) to identify and compare health care resources commonly available to the consumer in urban, community, and rural environments, 6) to discuss current issues in health care delivery, and 7) to compare and contrast proposed solutions.

Related Activities in Occupational Therapy: To find resources for information about a client; determine client's suitability to a specific occupational therapy program; coordinate client's occupational therapy with his overall treatment program; plan and arrange client's continuing program outside of institutional setting; implement client referrals; confer with other professionals to obtain information; convey information to other professionals; and consult with community agencies concerning occupational therapy needs.

Suggested Objectives:	Examples:
The Learner Should: 1. Identify and describe health care systems in the United States; identify and explain types of health care given in each system and classify each type under an appropriate system.	Systems: hospitals, community health organizations, nursing homes, rehabilitation centers, etc. Preventive Health Care: designed to prevent health breakdown through maintenance, screening, and treatment. Examples - public health services, community mental health services, school screening programs, "Head Start", etc. Acute/Restorative: to regain health or obtain optimal function. Examples - hospitals, rehabilitation centers, etc. Maintenance: designed for adjustment to and prevention of further disability or deterioration. Examples - sheltered workshops, nursing homes, etc.

2.	Identify and list each major division included in the medical and allied medical professions and the subdivisions of each.	Physician: general practitioner, internist, surgeon, pediatrician, etc. Nursing: nurse with Graduate or Baccalaureate degree; nurse with Associate degree, licensed practical nurse (L.P.N.), nurse aide, etc. Allied Health: Physical Therapy, Medical Technology, Medical Records, Radiologic Technology, etc.
3.	Describe the stated roles and functions of the major medical and allied health professions identified in 2.	
4.	Describe in general the credentials required for each of the above and the educational requirements for each.	Vocational Diploma, Associate Degree, Bachelor's Degree, Advanced Degrees, Registration, Liscensure, Certification, etc.
5.	Identify and explain how consumers with given physical and psychosocial problems may obtain care.	Client has a headache, gets aspirin. Client has the flu, goes to the family physician or clinic. Client has an automobile accident, goes to emergency clinic, etc. Where can client go when paralyzed, addicted to drugs, his wife abuses his children, etc?
6.	Identify and explain various ways the client's care may be paid for.	First party (by client); second party (the agency providing tx); third party (by medical insurance, govt. agencies, donations), etc.
7.	List and compare the types and quantity of health care resources commonly available in urban, community, and rural environments.	Urban: acute care - hospitals, clinics, etc. restorative - rehabilitation centers, etc. preventive - family health clinics, etc. Community: acute and preventive care. Rural: frequently acute care only.

8. Identify and describe current health care issues as reported in the medical and allied health literature.	Issues: Rising costs of health care. Inefficiency of the system. Accessability and acceptability to clients, etc.
9. Identify and discuss proposed solutions to health care issues; compare and contrast those solutions, and draw conclusions about which solutions he perceives as being optimal.	Universal health insurance, group medical practice, government control of credentialing, health maintenance organizations, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
PI: 32, p. C-13
F: 12, p. C-30; 45, p. C-37; 71, p. C-43
References, p. C-107

12. Psychopathologies: Overview of psychiatric conditions and normal behavior deviations with applications in symptom recognition.

Overall Performance Objective: 1) To identify the differences between normal and pathological behavior, 2) to identify, describe, and discuss psychiatric conditions and symptom complexes, 3) to demonstrate and elementary skill in recognizing pathological behaviors, and 4) to describe, compare, and contrast a variety of treatment approaches.

Related Activities in Occupational Therapy: To evaluate the client's level of psychosocial function; formulate and coordinate occupational therapy treatment plan; implement therapeutic interventions; guide client to improve interpersonal skills; and facilitate client's constructive self-expression and interpersonal-social skill development.

Suggested Objectives:	Examples:
The Learner Should:	
1. Discuss and describe his perceptions of normal behavior and give examples.	Intellectual, affective, social, cultural, etc.
2. Identify his perceptions of deviant behavior and give examples.	
3. Recognize defense mechanisms which operate in the normal individual and analyze their value in sustaining mental health.	Rationalization, sublimation, projection, etc.
4. Describe and recognize pathological use of defense mechanisms and analyze their role in sustaining pathology.	Compulsiveness, rationalization, projection, etc.
5. Describe the continuum of disruption or disintegration of each ego function commonly seen in occupational therapy.	Reality testing: judgment - 1. poor enough to damage life and limb 2. poor enough to play a grossly inappropriate role 3. poor care of self 4. poor social judgment

	5. unable to be creatively adaptive, careful, conservative requires documentation. 6. no gross defects - sometimes creative. 7. optimal judgments.
6. Identify, list and describe classifications of psychiatric conditions; explain how these behaviors deviate from the normal developmental pattern and identify their theoretical etiology.	Organic Brain Disorders (acute and chronic); Functional Disorders (psychotic, psychophysiologic, autonomic and visceral disorders); Personality Disorders (character disorders); and Special Symptom Reactions
7. Identify and describe symptom complexes of the kinds of psychiatric disorders commonly seen in an occupational therapy setting and relate them to the above psychiatric conditions.	Functional Disorders: distortion of reality, distortions of perceptions, personality disorganization, regression, etc.
8. Given observational or interview situations of each disorder, develop a beginning skill in recognizing (not diagnosing) each.	
9. Identify and state the classifications of given therapeutic methods for clients with psychosocial dysfunction. Compare and contrast these methods in terms of their relative usefulness for various clients in various settings.	Behavior therapies: reinforcement techniques. Organic therapies: psychopharmacology, EST. Talking therapies: psychoanalysis, non-directive, directive. Group therapies: psychoanalytic, trans-actional, dynamic.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 7, p. C-9; 13, p. C-10; 36, p. C-14
F: 1 & 5, p. C-28; 7 & 9, p. C-29; 30, p. C-33; 39, p. C-35; 41, p. C-36; 55 & 56, p. C-39; 58, p. C-40; 90 & 93, p. C-46 98 & 99, p. C-47
References, p. C-108

13. Pathologies of Physical Systems: Neurologic Conditions: Overview of disease processes or disabilities of the nervous system commonly seen in an occupational therapy setting.

Overall Performance Objective: 1) To identify, describe, and classify disease and disabilities commonly seen in occupational therapy by organic involvement, major symptoms or symptom complexes and known or theoretical etiology and prognosis and 2) to describe treatment approaches and methods for each and infer how occupational therapy may be involved in treatment for each disease or disability.

Related Activities in Occupational Therapy: To analyze client's motor function or energy level; formulate therapeutic motor activities and design assistive, supportive, or preventive orthosis; guide client in attaining or maintaining optimal motor abilities and physical independence, and supervise and instruct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe the components of a neurological examination.	Anatomical localization via neurological history, special disgnostic procedures, electroencephalogram, electromyography, etc.
2. Given a list of specific diseases:	
(a) classify by organic involvement and disease process.	
(b) describe major clinical symptoms or symptom processes.	
(c) describe known or theoretical etiology and prognosis.	
(d) describe overall or general treatment approaches.	
(e) analyze and infer how occupational therapy may be involved in treatment.	Neurosurgical Disorders: trauma, intervertebral-disc pathology, abscess, etc.

Primary muscle and neuro-muscular junction disorders: myopathies, dystrophies, myotonia, myasthenia.
Familial periodic paralysis:
Infections: toxic and deficiency disorders of the nervous system.
Cerebrovascular disorders.
Psychological vs. organic dysfunction of nervous system: conversion reactions, functional overlay, headaches, etc.
Seizure disorders.
Spinal cord dysfunction.
Congenital and childhood disorders of the central nervous system.
Disorders of perceptive and integrative functions: aphasias, apraxias, agnosias, etc.
Disorders of the peripheral autonomic nervous system.
Degenerative diseases of the CNS: Multiple Sclerosis, Parkinsonism hereditary ataxias, A.L.S. brain tumors.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Essay, p. B-11
List, p. B-11

Suggested Resources:
PI: 10, p. C-9; 27, p. C-12; 28 & 29, p. C-13;
F: 25, p. C-32; 27, p. C-33; 52, p. C-39; 61, p. C-41;
66 & 69, p. C-42; 78, p. C-44; 94, p. C-47; 102, p. C-49;
102, 103, & 106, p. C-49; 111, p. C-50; 118, p. C-51
References, p. C-111

14. Pathologies of Physical Systems: General Medical and Surgical Conditions: Overview of disease processes or disabilities commonly seen in general medical, acute or convalescent settings in occupational therapy.

Overall Performance Objective: 1) To identify, describe, and classify general medical disease and disabilities commonly seen in occupational therapy by systemic involvement, major symptoms or symptom complexes and known or theoretical etiology and prognosis, 2) to describe treatment approaches and methods for each, and 3) to infer how occupational therapy may be involved in treatment for each disease or disability.

Related Activities in Occupational Therapy: To analyze client's motor function or energy level; formulate therapeutic activities, plan and design assistive, supportive, or preventive orthosis; guide client in attaining or maintaining optimal motor abilities and physical independence; and supervise and instruct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe disease processes and give examples of each.	Infectious diseases: hepatitis, meningitis, etc. Chronic systemic diseases: nephrosis, lupus, diabetes, etc. Neoplasms: Leukemia: malignant tumors, etc. Traumatic damage: internal, skin burns, chemical poison, etc.
2. Given a list of specific diseases processes: (a) classify by systemic involvement and disease process. (b) describe major clinical symptoms or symptom complexes. (c) describe known or theoretical etiology and prognosis. (d) describe overall or general treatment approaches.	Thrombophlebitis and pulmonary embolism Congestive heart failure and pulmonary edema Asthema Chronic obstructive lung disease Bronchiectesis Lung Cancer: complication and therapy Diseases of the breast and therapy Coronary artery disease Acute myocardial infarction Pulmonary infection and tuberculosis High blood pressure Cerebrovascular accident Diseases of the joints Collagen diseases

(e) analyze and infer how occupational therapy may be involved in treatment.

Drug abuse and complications
Management of the burned patient
Peripheral vascular disease
Raynaud's Disease
Chronic Kidney Disease
Renal infections
Diabetes and its complications
Hepatitis
Infectious Mononucleosis
Pancreatitis
Gall bladder disease
Alchol-abuse and complications
Cirrhosis
Malnutrition
Gastrointestinal bleeding
Peptic ulcer disease
Ulcerative colitis and regional enteritis
Anemia-different types
Polycythemia
Leukemia
Hyperthyriodism
Myxedema
Diseases of the adrenal gland:
  Cushing's disease
  Addison's disease

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Essay, p. B-11

Suggested Resources:
VT: 14, p. C-20; 17, p. C-21
F: 4, p. C-28: 20, p. C-31; 42, p. C-36; 70, p. C-42; 79, p. C-44; 88, p. C-46; 106, p. C-49
References, p. C-111

15. Pathologies of Physiological Systems: Orthopedic Conditions: An overview of clinical orthopedic conditions frequently seen in occupational therapy, including systemic involvements, etiologies, overall treatment rationale.

Overall Performance Objective: 1) To identify, describe, and classify orthopedic disease and disabilities commonly seen in occupational therapy by systemic involvement, major symptoms or symptom complexes and known or theoretical etiology and prognosis, 2) to describe treatment approaches and methods for each, and 3) to infer how occupational therapy may be involved in treatment for each disease or disability.

Related Activities in Occupational Therapy: To analyze client's motor function or energy level; formulate therapeutic motor activities and design assistive, supportive, or preventive orthosis; guide client in attaining or maintaining optimal motor abilities and physical independence; and supervise and instruct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should: 1. Review and describe the skeletal system; discuss ways in which it may be damaged or diseased, and describe the overall effect on human function for each type of damage.	Fractures, amputations, infections, inflammations, congenital deformity, etc.
2. Describe and discuss a given number of clinical orthopedic conditions including: (a) systemic involvement. (b) etiology. (c) major symptoms and symptom complexes. (d) overall medical treatment. (e) prognosis (f) analyze and infer how occupational therapy may be involved in the treatment process.	Fracture Principles: upper extremity, lower extremity, axial skeleton, soft tissue injuries, etc. Amputations: upper and lower extremities. Infections: bones and joints. Arthritis: all types. Neuromuscular disease and cerebral palsy. Congenital deformities. General affections of skeleton: bone tumors, affections of spine and thorax, affections of low back, scoliosis, Milwuakee Brace, affections of neck and shoulder, elbow and wrist, hand, hip, knee, foot and ankle, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Essay, p. B-11

Suggested Resources:
F: 15, p. C-30; 40, p. C-35; 103, p. C-49; 115, p. C-51
References, p. C-112

16. Pediatric Conditions: An overview of disease and disability relative to or important in childhood, including implications for normal growth and deveoopment.

Overall Performance Objective: 1) To identify, describe, and classify physical and psychosocial pediatric disease and disabilities commonly seen in occupational therapy by systemic involvement, major symptoms or symptom complexes and known or theoretical etiology and prognosis, 2) to describe treatment approaches and methods for each, and 3) to infer how occupational therapy may be involved in treatment for each disease or disability.

Related Activities in Occupational Therapy: To analyze client's level of developmental function; formulate therapeutic activities plan; guide client in attaining or maintaining optimal developmental level; and supervise and instruct staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and discuss commonly know disorders which are either caused or indicated by a developmental lag.	Mental retardation, psychosocial problems, perceptual-motor problems, etc.
2. Given a specified number of childhood disorders, describe: (a) area of involvement, psychosocial or physical. (b) etiology and prognosis. (c) major symptoms and symptom complexes - overall treatment approach. (d) how occupational therapy may be involved.	Developmental disorders: situational disorders, neurotic disorders, neurotic character disorders, psychotic disorders, psychotic character disorders, etc. Disorders associated with organic brain damage: cerebral dysfunction, convulsive disorders, hearing disorders, speech disorders, reading disabilities, learning disabilities, mental retardation, phenylketonuria, Down's Syndrome, degenerative neurologic diseases, etc. Trauma: Battered Child Syndrome, poisoning, burns, etc. Allergic disorders. Connective tissue diseases, rheumatic fever, etc. Infectious diseases: encephalitis, meningitis, etc.

Congenital heart disease, congenital malformations, etc.
Endocrine disorders, chronic liver disease, etc.
Nutritional deficiencies: malnutrition, obesity, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11

Suggested Resources:
PI: 40, p. C-15
VT: 2, p. C-18; 12, p. C-20; 19 & 20, p. C-21
F: 6, p. C-28; 7 & 9, p. C-29; 15 & 16, p. C-30; 19, p. C-31;
39, p. C-35; 43, p. C-37; 56, p. C-39; 79 & 81, p. C-44
93, p. C-46; 94, p. C-47; 109 & 111, p. C-50; 113 & 116, p. C-51
120, p. C-52
References, p. C-112

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

17. Problem Solving Approach to Learning: A method of problem solving to be applied in occupational therapy.

Overall Performance Objective: To identify and interpret problem solving techniques and relate their application to tasks.

Related Activities in Occupational Therapy: To gather information; plan effective use of time; determine instructional methods; arrange, implement and adapt activities; apply behavior reinforcement or modification techniques; and determine appropriate safety techniques.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a problem solving method, list situations where each step can be applied.	Identification of the problem. Determination of alternatives and resources. Selection of solution. Performance of solution. Evaluation of solution and presentation of results.
2. Given the problem of finding the resources for learning about a given aspect of occupational therapy, apply the problem solving method to find the resources, seek out the information, and discuss what has been found.	
3. Given the problem of planning for efficient use of time in performing specified tasks, apply the problem solving method to write out a daily schedule of activities and follow that schedule.	Tasks: written assignments, group assignments, etc.
4. Given the problem of planning and preparing an activity for other individuals, apply the problem solving method to develop a plan and implement the activity.	Party, luncheon, classroom presentation, etc.

5. After using a problem solving method in a variety of situations, state his perceptions of where and how the problem solving method is applicable.

Suggested Teaching Strategy:
  Student Independent, p. A-8
  Student-Student Group, p. A-7

Suggested Evaluation:
  Completion, p. B-10
  Observational Techniques, p. B-12

Suggested Resources:
  F: 92, p. C-46
  References, p. C-114

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

18. Work Simplification Techniques: Use of problem-solving and body mechanics for efficient and safe performance of an activity.

Overall Performance Objective: 1) To identify and apply work simplification techniques to his own activities and 2) to explain and demonstrate activities of daily living or housekeeping.

Related Activities in Occupational Therapy: To plan and arrange material and equipment placement and planning activities of daily living and homemaking training.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify work simplification methods commonly used in occupational therapy.	Problem solving applied to planning an activity, gathering materials together, etc. Body mechanics applied to bending and stooping efficiently, pushing and pulling with body weight, etc.
2. Describe how work simplification methods can be used in his own work activities.	
3. Apply work simplification techniques to daily work activities.	Planning steps, using proper body mechanics, etc.
4. Use work simplification techniques and techniques of giving directions to instruct another individual in a housekeeping activity.	Cleaning a table, putting a cabinet in order, arranging furniture, cooking a meal, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
True-False, p. B-8
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 18, p. C-39; 64, p. C-42; 87, p. C-45
References, p. 114

19. Safety Procedures and First Aid: Methods and procedures which reflect commonly accepted principles of personal and client protection.

Overall Performance Objective: To identify and apply safety procedures to client treatment situations and his own activities.

Related Activities in Occupational Therapy: To maintain client and personal physical status and arrange and plan storage of material and equipment for safe usage.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify potential hazards inherent in materials and equipment commonly used in occupational therapy.	Fire hazards, sharp edges, hot surfaces, etc.
2. State how materials may be safely used.	
3. Practice using materials and equipment in a safe manner.	
4. Recognize safe storage and placement for hazardous material and equipment.	Storage of combustables in metal containers, placement of power tools, with switch in "power off" position, placement of materials in cabinets in such a way that they do not fall, labeling all material containers and storage cabinets, placement of appropriate warning signals, etc.
5. Demonstrate comprehension of safety procedures in a given situation.	
6. Identify and explain methods of lifting, transportation, and carrying heavy or large items according to commonly accepted definitions of safety.	

7. List appropriate body movements used for lifting and placing items without personal injury.

8. Identify and explain methods of lifting and handling clients according to commonly accepted definitions of safety.

9. Relate these methods to a given disabling condition.

10. State how to change client's position, rearrange client's clothing, and place extremities for safe transportation, escort, and treatment.

11. Identify physical and emotional signs of client which might give cues to the start of an emergency situation.

    Loss of color in lips and nail beds, perspiration, dilated eyes, shallow, uneven breathing, combativeness, etc.

12. Recognize when a situation in an occupational therapy setting becomes an emergency and identify and describe procedural steps usually required to meet the emergency.

    Situation: fire, cut (from broken skin to arterial bleeding), respiratory distress, cardiac distress, seizures, fainting, falling, an attacking client.

    Procedures: know before emergency where help is, how to evacuate area and put out small fires, how to use the compression, bandages, resuscitation and seizure procedures, etc.

13. Demonstrate an acceptable skill in performing minor emergency procedures as required.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p, B-12

Suggested Resources:

PI: 17, p. C-11
FS: 4, p. C-23; 5 - 7, p. C-24
FL: 1, p. C-26
F: 122, p. C-52
References, p. C-115

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

20. Transferring and Lifting Clients: Assisting clients to change position or move from one place to another.

Overall Performance Objective: To identify, describe, and apply methods of safe lifting and supporting a client during transfer.

Related Activities in Occupational Therapy: To assist client to and from treatment or training area and assist client in transfer to and from bed, wheel chair, stand-in-table, etc.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe body mechanics which are used to safely lift and support clients.	Moving client over center of body, stooping from the knee, pulling with body weight, etc.
2. Identify and describe types and functions of transportation equipment.	Wheelchairs, gurney carts, orthopedic carts, Stryker Frame, etc.
3. Recognize given component parts and functions of transportation equipment.	Back rests, brakes, arm rests, belts, aide guards, foot pedals, etc.
4. Identify potential hazards of each vehicle.	Client sliding or falling from vehicle, vehicle tipping or running into other objects, etc.
5. Given an individual exhibiting a specific disability and a specific vehicle, assist the individual in or onto the vehicle by applying information previously learned.	From high bed to wheelchair, wheelchair to stand-in-table, etc.
6. List specific areas in a health establishment or home in which barriers to transportation may appear.	Doorways, inclined planes, stairs, curbs, elevators, etc.
7. Identify specific methods and procedures to overcome barriers commonly encountered.	Turning wheelchair around and backing onto or through a curb or doorway, etc.

8. List physical disabilities commonly seen in an occupational therapy department.	One-sided paralysis, paralyzed legs and arms, stiff joints, etc.
9. Identify methods of transferring physically disabled clients.	Helping the hemiplegic on his bad side, locking braces before lifting, supporting client in non-painful areas, etc.
10. Given a simulated patient exhibiting a selected disability, match an appropriate transfer method with a disability condition.	
11. List ambulation equipment used by physically disabled clients.	Canes, crutches, walkers, etc.
12. Given specific instructions in helping physically disabled clients, assist a physically disabled client in going from one place to another.	
13. Analyze a given transferral, transportation, or escort situation and identify the potential hazards which may appear.	Hazards: client weight, size, incoordination, stairs, slippery floors, doorways, etc.
14. Given a simulated transfer situation, determine an appropriate course of action needed to be followed.	Course: decide he can do it and perform the task, decide he cannot do it alone and seek help, find a wheelchair, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
S: 1 - 11, p. C-16
VT: 2, p. C-18
FS: 1 & 2, p. C-23
FL: 2, p. C-26
F: 102, p. C-49; 108, p. C-50
References, p. C-115

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

21. Interpersonal Relationships: Overview of the dynamics of interpersonal relationships and experiential learning in interpersonal skills required for occupational therapy.

Overall Performance Objective: 1) To identify the information in communication, psychology, and cultural sociology which relate to interpersonal relationships, 2) to identify attitudes which facilitate constructive interpersonal relationships, 3) to demonstrate an acceptable skill in formulating constructive relationships with peer and authority figures, and 4) to demonstrate a degree of proficiency in developing supervisory and therapeutic relationships.

Related Activities in Occupational Therapy: To confer and exchange information with staff and clients; receive instructions and directions; and give instructions and directions.

Suggested Objectives:	Examples:
The Learner Should:	
1. List and discuss as many factors as possible which affect the formulation and maintenance of individual relationships and draw a conclusion about how they may prevent or alter relationship formulation.	Developmental factors: differing relationships are formed at each life stage, etc. Psychological factors: ego strengths, response mechanisms, feelings, etc. Communication factors: how people come across to each other, etc. Cultural factors: life style, value system, etc.
2. Identify, list, and describe types of relationships developed by human beings during the life span.	Parent, child, and adult combinations.
3. Describe a variety of ways in which roles influence a relationship.	Parent-Child - protective, authoritative, etc. Child-Parent - dependent, manipulative, etc. Child-Child - competitive, mutually assistive, etc. Adult-Adult - thoughtful, mutually responsive, etc.

4. Analyze how roles within a given relationship may fluctuate and change and form generalizations about possible causes for those changes.	Between friends, competition in a given sport may be evident, but competition for school grades may not. This may have a variety of causes; for example, both are equally interested in the sport, one is disinterested in grades, or is afraid to try to compete, etc.
5. Analyze some of his own relationships, determine the kinds of roles he has assumed and the kinds of roles he habitually assumes in given types of relationships.	With peers, authorities, etc.
6. Define and discuss the term "contract", and describe situations in which contracts are evident within relationships.	Definition: An agreement between two or more parties for doing or not doing some specific thing. Examples: "Mariage contract", "parent-child contract", "child-parent contract", "employee-employer contract", etc.
7. Identify and discuss conditions which facilitate constructive relationships and give examples of each.	Valuing another human being, openness, sensitivity, flexibility, etc.
8. Identify and discuss conditions which inhibit constructive relationships and give examples of each.	Suspicion, rigidity, prejudice, etc.
9. Define the term "trust", discuss the dynamics of trust in a variety of relationships, explore his own perceptions of trusting, and analyze some of his personal relationships to determine a relative degree of trust.	Definition: Reliance on the integrity, justice, or some other quality of a person; confidence in another. How is trust developed? How is mistrust developed? How can vulnerable human beings establish trust in others? Is it desirable?

10. Given the experience of being directed to do an activity, explore and analyze personal feelings and attitudes towards being directed in a variety of ways, and demonstrate an acceptable skill in accepting or rejecting the direction.	Authoritarian direction. Democratic decision for direction.
11. Given the assignment of directing another individual to do an activity, identify and explain methods of constructive direction and demonstrate an acceptable skill in directing another individual.	Methods: being courteous, sensitive to another person's needs, firm, etc. Activities: request another person to do a service; set a deadline for another person, etc.
12. Explore and discuss methods of establishing rapport with another individual and demonstrate an acceptable skill in establishing rapport in a situation common to occupational therapy.	Methods: being friendly, warm, accepting, non-directive, firm, etc. Activities: start a conversation with a stranger, etc.
13. Given the assignment of conferring with another individual to reach a mutual decision, demonstrate an acceptable skill in problem solving with a given variety of role relationships.	Confer with an authority figure to determine assignment. Confer with a peer to determine plans for a party, etc.
14. Given the assignment of counseling an individual, demonstrate an acceptable skill in helping another individual to work through a problem.	Helping a peer determine how to study for an examination. Helping a child determine how to solve a puzzle.
15. Discuss and draw conclusions concerning the therapeutic or "helping" relationship in relation to other dyadic relationships.	When are each appropriate? How are they similar? Different?

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:

Matching, p. B-9
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

G & S: 1 & 3, p. C-7
PI: 40, p. C-15
F: 18, p. C-30; 24, p. C-32; 97, p. C-47
References, p. C-115

22. Task Group Problem Solving: An overview of group dynamics theory with experiential learning in group problem solving and group dynamics.

Overall Performance Objective: 1) To identify and describe the dynamics of group interaction, 2) to list and describe group roles, 3) to discuss role assumption and role change processes, 4) to explore and analyze the dynamics of group interaction, and 5) to demonstrate skill in constructive communication techniques and group problem solving.

Related Activities in Occupational Therapy: To plan and implement therapeutic task groups for clients; participate as a member of a treatment team; and coordinate and supervise occupational therapy services and staff activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "group processes".	
2. Given terms related to group processes, explain what they mean and what physical and emotional behaviors are displayed in each.	Intra-group adjustment, polarization, cohesiveness, relationship formulation, dependency, counterdependency, etc.
3. Identify the normal developmental continuum of group processes commonly seen in most groups.	Dependency - Interdependency.
4. List and describe leadership roles commonly assumed by group members.	Initiator, clarifier, timekeeper, supporter, etc.
5. List and describe disruptive roles which may be assumed by group members.	Information seeker, dissenter, etc.
6. Describe the dynamics of role assumption usually displayed by individuals in a group.	Leadership roles often are assumed in relation to group needs and talents.
7. Describe the dynamics of role fluctuation and change as it applies to group process.	Roles are not static during the primary phases of group prodesses, they shift and change

	according to current group process and group members' personalities.
8. Identify and discuss the types of group decisions and problems frequently encountered by occupational therapists.	Selection of client evaluations, treatment planning, student training, supervisory problems, etc.
9. Given the assignment of participating in a small task group related to occupational therapy, demonstrate skill in constructive communication techniques and group problem solving.	
10. Analyze by exploring and discussing: a. the specific dynamics of the task group listed above b. his perceptions of his own personal role assumptions and fluctuations and how he might have done otherwise in relation to specific incidents c. the problem solving procedure used and those problem solving procedures which were the most difficult for the group d. the quality of the task group product or findings e. the relationship between product quality and group dynamics.	
11. Discuss, compare, and contrast group versus individual perceptions of each member's individual contributions.	

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:

- Matching, p. B-9
- Completion, p. B-10
- Essay, p. B-11
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:

G & S: 3, p. C-7
F: 18, p. C-30; 23, p. C-31; 46, p. C-37; 92, p. C-46; 121, p. C-52
References, p. C-115

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

23. Instructional Planning and Methods: Instructional planning and the application of teaching techniques.

Overall Performance Objective: 1) To identify, expand, and apply methods of planning learning experiences and 2) to identify and apply teaching methods and media.

Related Activities in Occupational Therapy: To plan, direct, or implement therapy according to client capabilities and cultural and educational background; supervise staff activities and instruct during on-the-job or continuing education program.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list principles or steps in planning educational experiences commonly used in occupational therapy.	Gathering information concerning needs and abilities of client or group. Determining objectives or outcome of the learning experience. Developing appropriate step-by-step procedures.
2. Identify and discuss his perceptions of the information required for determining the abilities and needs of the client or group.	Education, motor skills, interests, etc.
3. List the kinds of information required for teaching a given individual or a group a specified activity commonly used in occupational therapy.	Teaching a hemiplegic to put on a shirt - need to know if he can understand verbal instructions, remember, feel his body in space, etc. Teaching a group a decoupage activity - need to know if they can remember instructions, handle paint brushes, use scissors, etc.
4. Identify and define the components of an instructional objective.	Audience - who will do the activity? Behavior - what must the learner do?

		Conditions - under what circumstances will the learning occur? Degree - how well or how much must be done?
5.	Compose a given number of instructional objectives.	A hemiplegic adult male (audience) will put on and button his shirt (behavior) without assistance (degree) while sitting in a chair (condition).
6.	Given a hypothetical treatment situation, analyze it and compose a step-by-step breakdown to complete the activity.	Putting on a shirt for a hemiplegic: 1. Lay shirt on lap, with collar towards stomach, label up. 2. Put affected hand in armhole. 3. Work affected arm into sleeve, until sleeve is gathered above the elbow. 4. Etc.
7.	Identify commonly used methods of giving explanations in occupational therapy and apply those methods to explain a procedure to another individual.	Speaking slowly, using simple words, asking learner if he understands, asking learner to repeat explanation in his own words, etc.
8.	Identify commonly used methods of giving a demonstration in occupational therapy and apply those methods in demonstrating an activity to an individual or group.	Explain clearly, position so that learner can see clearly, ask learner to copy movements or procedures, position learner beside demonstrator so that motions are not reversed, etc. Demonstrate method of transfer, how to use assistive device, do a craft, etc.
9.	Identify methods commonly used in occupational therapy to evaluate performance of an activity and apply these methods to establish what the outcome should be for a given number of activities.	Methods: Determine how much, how many times, to what degree a thing should be done (criteria). Determine what evidence is needed to signal client completion or mastery (measurement) of an activity. Examples: 1. Criterion: put on shirt independently.

	Measure: teacher observes client put on and button shirt. 2. Criterion: set up loom with correct threading sequence and tension. Measure: weft shows correct pattern, threads do not break, and tension is even.
10. Identify and list methods of instructing an individual or group to perform an activity commonly used in occupational therapy and apply those methods to instructing an individual or group in performance of a specific activity.	Explaining, demonstrating, supervising practice, going through the motions with learner, stopping the learner and correcting motion, praising appropriate responses, etc.
11. Identify, list and describe media commonly used in teaching, and state its possible application to occupational therapy.	Audio-Visual media: films, film loops, recordings, tape recorders, television cameras. Application: films, film loops - as demonstrations, for discussion. Recordings for learning to follow spoken directions. Tape recorders and cameras for feedback to learner.
12. Demonstrate an acceptable skill in using selected media to teach an activity to another individual or group.	Texts, manuals, written instructions, programmed instruction, educational toys, etc.
13. Given a specific individual or group, select an activity, plan instruction, instruct another individual or group, and compare the actual with the desired outcome of the activity.	

Suggested Teaching Strategy:
- Student Independent, p. A-8
- Teacher-Student Group, p. A-6

Suggested Evaluation:
- Essay, p. B-11
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- F: 14, p. C-30; 46, p. C-37; 97, p. C-47
- References, p. C-116

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

24. Therapeutic Media: Play as Habilitation: Overview of the therapeutic uses of play with applications for stressed or deprived children.

Overall Performance Objective: 1) To identify and describe the normal continuum of play, 2) to describe and discuss the dynamics and needs of children under stress or deprived children, and 3) to demonstrate skill in planning remedial or habilitation play programs for those children.

Related Activities in Occupational Therapy: To plan and supervise supportive pediatric programs; and plan preventive health care programs in day care, school, or other community agencies.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify the continuum of play needs in each of the developmental stages and list and describe play activities common to each phase and developmental component.	Childhood: Biogenetic: "burning up energy" activities. Cognitive-perceptual-motor - holding, banging, casting, walking, running, putting in, taking out, puzzles, etc. Social: cuddling, repeating words, being read to, parallel play. Cultural: games, teams, etc.
2. Given a number of normal "behavior problems" frequently encountered with children, apply a problem solving approach to suggesting ways of dealing with the problem.	Problem: 2 year old who says "no" to everything. Ways: Don't enter into power struggle. Tell child "it's time to . ." or "now we will . . ." and then do it. Or, when possible, give child yes or no choice and honor his choice. Problem: 4 year old who cries each time his mother leaves. Problem: 7 year old who hits smaller children, etc.

3. Define the term "situational stress" and identify stressful situations for children commonly seen in occupational therapy.	Situation stress: situations which create an interruption of the normal developmental process. Situations: separation from home environment, uncomfortable, ill, in pain, separation from mother, unfamiliar environment and routine, etc.
4. Identify common emotional and behavioral reactions to stressful situations.	Reactions to new and threatening people: anxiety, regression, anger, fear, grief, acting out, refusal to participate, etc.
5. Discuss how each situation may be exhibited by a client in an occupational therapy setting.	Anxiety (fear, crying, hiding). Grief (withdrawal, turning away).
6. Discuss roles and attitudes the therapist may assume in working with children under stress.	Accepting feelings; encouraging expression of feeling; gentle, but firm kindness; setting and maintaining rules; etc.
7. Given a number of situations with children under stress, apply a problem solving approach to suggest ways to deal with them.	Situations: 1. Hospitalized 5 year old who hasn't seen his parents in a week. Sits in corner and stares out of window. Will not respond to encouragement to participate in playroom activities. 2. Infant, 9 months, who has bilateral leg casts, and is in traction. Parents visit daily. Child no longer makes eye contact with adults, turns away from parents. 3. 2-1/2 year old who cries continuously, except when held.
8. Given the problem of planning a playroom or play program for hospitalized children, analyze the problem and plan a program to meet the children's needs.	Problems: 1. Pre- and post-surgical patients, ages 2-12 years, about 20 children, all ambulatory. 2. Infant ward, children aged 6 months through 2 years. Variety of GM&S problems.

	3. Pre-teenagers with variety of GM&S problems. Have been performing some "creative mischief" on ward (such as using hypodermics as water pistols, etc.)
9. Describe and discuss behaviors commonly seen in culturally or environmentally deprived children.	Cultural deprivation behaviors: immature, cognitive-perceptual-motor, social behaviors. Probably not culturally immature in their own culture, but may not be able to cope with middle class standards. Environmental deprivation behavior: either intrinsic or extrinsic - may see overall immaturity.
10. Given a number of problems for planning enrichment programs for culturally or environmentally deprived children, apply a problem solving approach to plan play programs for those children.	Problems: 1. 3-5 years olds from ghetto area. Have superior gross motor skills as a group, but immature concepts and fine motor skills. 2. Infants in a children's home, between the ages of 3 months to 18 months. Many show signs of severe developmental lag.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
F: 16, p. C-30; 39, p. C-35; 43, p. C-37; 76, p. C-43; 81, p. C-44
91, p. C-46; 114, p. C-51
References, p. C-116

25. Therapeutic Media: Recreation as Habilitation: Resources for and implementation of recreational activities commonly used in occupational therapy.

Overall Performance Objective: 1) To identify the rationale, and developmental appropriateness of recreational activities, 2) to list and find resources, tools, materials and skills involved in the recreational activities most commonly used in occupational therapy, and 3) to demonstrate an acceptable skill in organizing and leading recreational activities.

Related Activities in Occupational Therapy: To assist technicians in activities program planning and plan for guiding clients in developing personnel social or physical skills.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and discuss major developmental needs met by recreational activities.	Social needs: learning to relate, learning to compete, etc. Emotional needs: recognition, friendship, etc. Physical needs: exercise at developmental level of competence, etc.
2. Discuss the periods during the developmental continuum when recreational groups become a significant experience.	Periods and Groups: Early childhood - parallel play evolves into cooperation or sharing activities. Middle childhood - beginning of "gangs" and team activities - peer attitudes important.
3. Identify the types of group common to each period and relate how the group type is important to that developmental stage.	Adolescence - team and individual competition with other team members. Peer attitudes vital. Much learning from peer groups. Adulthood - separation of work groups and recreational groups. Task groups evident in both. Aging - established groups of friends important. Shared reminisence, friendly, competition, group tasks, etc.

4. Identify a number of table games commonly used in an occupational therapy department and given a list of specific games, classify them according to an appropriate category.	Playing cards: Bridge, Pinoccle, Euchre, etc. Commercial games: Monopoly, Clue, Puff Billiards, etc. Paper and pencil games: Hang the Man, Dot and Squares,
5. List resources, materials or set-up required for playing a given number of table games.	Instructions: rule books, party books, commercial games, rule pamphlet, materials, etc. Bridge: playing cards (double deck), table, four chairs, etc. Puff billiards: board, balls, syringes, table, etc. Battleship: paper, pencil, marked squares, etc.
6. Demonstrate an acceptable skill in playing at least one of each classification of table games.	
7. State for what ages and group needs each activity is suited.	
8. Identify a number of kinds of group games frequently used in occupational therapy and, given a list of specific games, classify the games under an appropriate category.	Get acquainted games: "I went to the market...", etc. Memory games: Observation, Concentration, etc. Guessing games: Twenty Questions, Charades, etc. Rhythm and clapping games: "Who stole the cookies?", etc. Group skits: "The king with the terrible temper", etc. Group sings: "On Moonlight Bay", etc.
9. List and find resources for a number of party or group games and demonstrate an acceptable skill in leading them.	
10. State for what ages and group needs each activity is suited.	
11. Identify a number of sport or active skill games and classify these games under an appropriate category.	Outdoor games: volley ball, badminton, tennis, archery, etc. Indoor active games: skittles, box hockey, ten-pins, basketball, etc.

12.	List resources and equipment required for a given number of sport or active game activities.	Instruction manual, materials and equipment, space requirements, etc.
13.	Demonstrate an acceptable skill in planning and leading a given number of active skill games.	
14.	State for what ages and group needs each game is suited.	
15.	Identify a number of kinds of dance and, given a list of specific dances, classify them according to the appropriate category.	Folk dances: Virginia Reel, Hora, Schottish, etc. Square dances: Texas Star, etc. Social dances: Shuffle, etc.
16.	Demonstrate an acceptable skill in planning and leading a given number of dances.	
17.	State for what ages and group needs each dance is suited.	
18.	Identify party activities commonly commonly seen in occupational therapy facilities and, given a list of specific ages and socio-economic groups, classify the activities under appropriate age or socio-economic group classifications.	Ages 3-5: short activities, small groups, active, frequent change, etc. Ages 9-11: team activities, active interspersed with quiet games, etc. Adult: card games, charades, challenging party games, etc. Aged: quiet games, indoor skill, etc.
19.	Organize a plan for a party involving a specific group and list activities in sequence with materials and equipment needed for each activity.	Situation: Valentine party for 25 geriatric individuals who are ambulatory but do not know each other.
20.	Demonstrate an acceptable skill in directing a party for a specific group.	
21.	Identify outdoor activities other than games and parties commonly used in an occupational therapy setting.	Gardening, nature study, bicycling, hiking, calisthentics, etc.

22. List resources and materials required for each outdoor activity.	Plot of land, garden tools, nearby woods, etc.
23. Demonstrate an acceptable skill in planning and implementing an outdoor activity for a group of individuals.	
24. Identify audio-visual equipment commonly used for recreational activities.	Film projector, slide projector, record player, tape recorder, etc.
25. Identify and list community resources for obtaining audio-visual equipment and discuss potential limitations for obtaining it.	Resources: libraries, travel agencies, schools, catalogs, etc. Limitations: budget, time, distance, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
VT: 8, p. C-19
F: 73, p. C-43
References, p. C-117

26. Activity Analysis of Therapeutic Media: Detailed determination of physical, cognitive-perceptual-motor, social and enculturation aspects of activity with implications in treatment planning.

Overall Performance Objective: To apply the steps or procedures required for activity analysis to analyze human activity and human behavior.

Related Activities in Occupational Therapy: To formulate treatment plans and modify or adapt treatment to meet the needs of individual clients.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "activity" as it relates to the concept of therapy.	Activity is a tool of therapy changed and modified to meet many objectives.
2. List domains of human behavior, list specific behaviors exhibited by human beings, and classify specific behavior under the appropriate domain.	Phychosocial: Symbolism, ego functions, interpersonal, group skills, etc. Physical: motion - range, degree of strength and endurance, amount, etc. Cognitive: perceiving, recalling, comprehension, applying, analyzing, etc. Perceptions: five senses, balance, perceptual constancy, etc. Motor: gross and fine; eye-hand, two and four extremity coordination, etc. Cultures: value to client? religious connotations?
3. Recognize that any activity includes all behavioral domains to varying extents.	Ceramics Weaving Playing Cards Can include all of the behavior domains - some domains are more pertinent than others.
4. Given pairs of behavior opposites and a general activity for each pair, state specific activity that can be used to elicit opposite behaviors.	Playing cards for: Group Interaction Play Euchre Independent action Play solitaire

Painting for:

Self-expression	Structure
Free Hand	Paint by number

Weaving for:

Range of motion at shoulder and elbow	Strength at shoulder and elbow
Use table loom	Use floor loom, weighted beam.

5. Define the term "gradation" as related to activity; discuss and and list a number of ways in which an activity can be gradated.	Gradation: a change by degrees, on a continuum. Ways to gradate: time - short to long term activity; resistence - 0 to heavy; range - small to large; supervision - close to none; structure - very to little; interaction - none to dyad to group; responsibility - none to complete, etc.
6. Define the term "adaption" as related to activity; discuss and list a number of ways an activity can be adapted for physical, psychosocial and cognitive function.	Adaption: to make suitable to therapeutic goal or plan. Ways to adapt: Physical position - e.g., standing, standing for tolerance, activity at shoulder motion, in lap, or on table for finger motion. Resistance - motion, unilateral, degree. Coordination - unilateral, bilateral, quadrilateral. Energy expenditure. Balance. Psychosocial - structure, attitude and role of therapist, interpersonal contacts. Cognitive - number of steps, complexity of direction, etc.
7. Construct an activity analysis form using appropriate categories and terminology.	Include all behavioral domains and behaviors pertinent to occupational therapy gradations, adaptations, etc.

8. Given resources for learning and exploring therapeutic media, use the form above to analyze in detail a number of media activities.	Play, recreation, manual arts, creative arts, etc.
9. Given activity analysis problems, demonstrate an acceptable skill in selecting and designing a variety of activities appropriate to the problem.	Problems: 1. 40 year old woman with radical mastectomy needs activity to reduce edema in upper arm, develop range, and strengthen thoracic and shoulder girdle muscles. 2. 16 year old paraplegic needs to develop adequate work tolerances preparatory to work readiness training, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

27. Therapeutic Media: Applied Design, Creative, and Graphic Arts: Principles of creative and graphic arts as they apply to occupational therapy activities analysis and program planning.

Overall Performance Objective: 1) To identify the elements of design, 2) to identify the media required for a given number of creative or graphic art activities, and 3) to demonstrate an acceptable skill in analyzing an activity to determine its behavioral and therapeutic aspects.

Related Activities in Occupational Therapy: To formulate therapeutic programs; instruct and assist clients in activities; or supervise staff in program implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe in his own words the elements and relationships in design.	Form, balance, perspective, dimension, etc.
2. Identify and describe in his own words the elements and relationships of color.	Hue, shade, tint, primary colors, secondary colors, complimentary colors, etc.
3. Identify tools, materials, and equipment most frequently used in graphic arts.	Ruler, compass, pens, pencils, scissors, papers of varying weights and textures, paints, brushes, etc.
4. Given design elements needed in a specific activity, demonstrate an acceptable level of skill in using the media and analyzing the activity to determine its behavioral and therapeutic a aspects.	Use paint, brushes, paper to demonstrate perspective on form, etc.
5. Given specific dimensions of a figure, apply a problem solving method to identify and use appropriate media.	Draw a three-inch equilateral triangle, a circle five inches in diameter, etc. by using charcoal, pencil, pastels, etc.

6. Identify a number of creative art processes and classify under those a number of appropriate media needed to perform in each process.	Processes: Painting - watercolor, oils, finger paints, etc. Collage - fabrics, papers, etc.
7. Given the task of analyzing a number of the above processes, apply the problem solving method to use a variety of media, design elements and colors, and analyze the activity to determine its behavioral and therapeutic aspects.	Watercolor design (freeform). Sketch of still life or model, collage, etc.
8. Identify a number of graphic arts processes and classify under those a number of methods and media for each process.	Processes: Drafting - diagrams, working drawings, etc. Printing - linoleum block, silk screen, press, etc. Modelling - leather carving, copper tooling, etc.
9. Given the task of analyzing a number of the above graphic arts processes, apply the problem solving method to use a variety of media and design elements and analyze the activity to determine its behavioral and therapeutic aspects.	Block printed stationery, working drawing for woodworking project, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 14, p. C-30; 21 & 22, p. C-31; 47, p. C-37; 48, p. C-38
83, p. C-44; 91, p. C-46
References, p. C-118

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

28. Therapeutic Media: Manual Arts: Application and analysis of procedures, use of tools, equipment, and other media commonly used in manual arts (such as wood, plastics, and metal).

Overall Performance Objective: 1) To identify the methods, procedures, media, and specifications used in manual arts common to most occupational therapy facilities, and 2) to demonstrate an acceptable skill in analyzing the procedures to determine their behavioral and therapeutic aspects.

Related Activities in Occupational Therapy: To formulate therapeutic programs; instruct and assist client in activities; or supervise staff in program implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1 Identify kinds of building materials used in manual arts in occupational therapy.	Wood, plastics, metal, etc.
2. For each identified kind of material, identify types of material and terms commonly used in materials specifications for requisitions.	Wood: walnut, pine, etc., measurements - board feet, thickness, length, etc. Plastics: types - hard, soft, measurements - thickness, sheet size, linear measure, etc. Metal: types - steel, cooper, silver measurements - sheet size, wire gauge, etc.
3. Identify and describe the function of a given number of hand and power tools commonly used in occupational therapy.	Hammer, saw, mitre box, jig saw, table saw, soldering iron, heat gun, power drill, screwdriver, etc.
4. List procedures used in constructing items of given materials; list the materials, tools, and equipment needed for each procedure.	Wood: reading drawings to scale. cutting - using saws. joining - nails, boards, screws, types of joints. Metals: cutting - saws, shears. joining - bonding agents. Plastics: cutting - saws, shears. joining - bonding agents.

5. Demonstrate an acceptable skill in analyzing and using given materials, a variety of hand and power tools, and a variety of construction procedures to determine their behavioral and therapeutic aspects.	Frame, book ends, copper wire bracelet, aluminum hammered ashtray, lucite picture frame, etc.
6. List and describe commonly accepted safe storage and maintenance techniques for all manual arts materials and equipment commonly used in occupational therapy.	Hammers - stored when not in use. Combustible solvents - stored in fireproof containers. Sharp tools - sharpened and stored, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
FS: 4, p. C-23; 5 - 7, p. C-24
FL: 3, p. C-26; 4, p. C-27
References, p. C-118

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

29. Therapeutic Media: Ceramics: Analysis and application of methods, procedures and techniques and use of equipment, tools, and materials commonly used in constructing ceramic places.

Overall Performance Objective: 1) To identify the methods, procedures, equipment, tools, and materials commonly used in ceramics activities in occupational therapy and 2) to demonstrate an acceptable skill in analyzing the behavioral and therapeutic aspects of the procedures and media.

Related Activities in Occupational Therapy: To formulate therapeutic programs; instruct and assist clients in activities; or supervise staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given list of various kinds of forming procedures commonly used in ceramics, describe the building process and, from a given sample display, select examples of each procedure.	Pinch, coil, slab turned, molded, wedged, sculpted, etc.
2. Given a variety of clays commonly used in occupational therapy, describe the properties and uses of each and, from a sample display, select examples of each clay.	Red: porous, relatively plastic, medium fire, most common building clay. White: less porous, very plastic, high fire, used for turning. Slip: fluid combination of clays, used for pour mold and joining.
3. Given a number of clay-forming tools, describe how each is used.	Modeling tools, cut off tool, wheel stand, paddle, wedging board, etc.
4. Identify and apply procedures usually undertaken in the preparation and storage of clay.	Preparation: wedging, making slip, etc. Storage: wrapping to facilitate proper drying and amount of moisture.
5. Demonstrate an appropriate skill in preparation and storage method.	

6. Given the task of constructing greenware, demonstrate an acceptable skill in analyzing and using a variety of preparation, storage, and forming methods.	Slab and coil pot, model figure, slip casting, making molds, sand casting, etc.
7. Identify the parts of a kiln, materials, procedures, and precautions used in firing a kiln and, given the task of firing a greenware piece, use appropriate procedures and precautions, time and temperature, according to directions.	Parts: walls, shelves, thermostat, controls, etc. Materials: cones, wash, trivets, etc. Procedures: loading, firing, removing, etc. Precautions: electricity, cooling requriements, etc.
8. Identify and explain in his own works common techniques of decorating green or fired ware and, from a sample display, select examples of each decoration technique.	Greenware: slip painting, incising, excising, etc. Fired ware: glazes, colors, gloss, textures, fire temperature, etc.
9. Demonstrate an acceptable skill in analyzing and using a variety of decoration techniques to determine their behavioral and therapeutic aspects.	

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:

Observational Techniques, p. B-12

Suggested Resources:

References, p. C-120

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

30. Therapeutic Media: Sewing and Needlework: Application and analysis of methods, techniques, and media used in sewing and needlework activities.

Overall Performance Objective: 1) To identify methods, techniques, and media used in needlecraft and sewing activities commonly used in occupational therapy and 2) to demonstrate an acceptable skill in analyzing an activity to determine its behavioral and therapeutic aspects.

Related Activities in Occupational Therapy: To formulate therapeutic programs; instruct and assist client in activities; or supervise staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a sewing machine, identify major parts of the machine, and explain their function.	Sewing machine bobbin, pressure foot, pressure release.
2. Identify and explain the types of sewing procedures and materials or fabrics commonly used in occupational therapy.	Cutting pattern (simple), making seams in cotton, webbing, plastic. Hemming cotton, attaching velcro snaps, fasteners. Joining heavy and light fabrics. Making string ties, etc.
3. Using a given number and type of hand and machine sewing procedures, demonstrate an acceptable skill in using the media and analyzing an activity to determine its behavioral and therapeutic aspects.	Spoonholder, work apron, ADL board, hemiplegic sling, etc.
4. Identify tools and materials used in decorative stitching and describe the possible use and function of these.	Needles: embroidery, sewing, tapestry. Threads: embroidery, crewel, linen, etc. Fabrics: felt, wool, linen, cotton, synthetics, webbing.
5. Name types of decorative stitching and classify common stitches used in each type.	Embroidery: french knot, chain, satin. Crewel: couching, running, etc.

	Needlepoint: gros, petit, cross, etc. Applique: applied, reverse, etc.
6. Demonstrate an acceptable skill in analyzing a given number and type of decorative stitches and determine their behavioral and therapeutic aspects.	
7. Given specific examples of needlework, name samples according to type of needlework used and identify and name types of sewing stitches used for each sample of needlework.	Knitting: knit, purl, cable, rib, drop stitch, etc. Crocheting: single, double, pop-corn, afgan, etc. Tatting: ring, join, etc.
8. Identify tools and materials most commonly used in needlework, describe their functions, and identify and list terms which are commonly used in ordering materials required for projects commonly used in occupational therapy.	
9. Demonstrate an acceptable skill in analyzing a given number and type of needlework procedures to determine their behavioral and therapeutic aspects.	

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Observational Techniques, p. B-12

Suggested Resources:
FS: 3, p. C-23
References, p. C-120

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

31. Therapeutic Media: Weaving, Knotting, and Rugmaking: Analysis and applications of methods, techniques, and media, use of equipment, tools, and materials commonly used in weaving, knotting, and rugmaking.

Overall Performance Objective: 1) To identify methods, techniques, and media used in weaving, knotting, and rugmaking common to most occupational therapy settings and 2) to demonstrate an acceptable skill in analyzing the procedures to determine their behavioral and therapeutic aspects.

Related Activities in Occupational Therapy: To instruct and assist clients in activities; formulate therapeutic programs; or supervise staff in treatment implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. From given samples of woven goods, identify the parts of woven fabric.	Warp, woof, weft.
2. From a given sample display, select examples of types of woven fabric.	
3. Identify frames, looms, and tools used in various types of weaving.	Inkle, card, plain, twill.
4. Identify the parts of table and floor looms, describe what kind of weaving can be done on each type of loom, and list what kind of tools are needed for each type of weaving.	Heddle looms: heddles, beam, beater, slagle hook, foot pedals, hand levers, etc.
5. Identify procedures used for a given number of looms and weaves, and analyze and use a given number of weaving procedures to determine their behavioral and therapeutic aspects.	Frame loom, braid weaving, weave-it squares, looper, paper weaving, etc.

6. From given knotted samples, select examples of types of knotting and knotting stitches.	Macrame or cord knotting: square half hitch, double square, spiral, etc. Rug knotting: turkish knotting, rya, latch hook, colonial knotting, fringe, braid weaving, etc.
7. Identify the equipment, tools, and materials required for knotting activities, describe their function or use, and identify terms most commonly used in buying materials.	Cord knotting: frame; cord and yarns-fiber, weight and size. Knotting frames: sizes, measurements. Webbing: mesh size.
8. Analyze a given number of procedures using a number of knotting procedures, stitches, materials, and equipment to determine their behavioral and therapeutic aspects.	Macrame jewelry, pillowtop, pot holder, etc.
9. From a given sample, select types of finishing techniques and state for which types of fabrication each finishing technique may be used.	Fabrication: woven, braided, Turkish knotting, braid weaving, rya, etc. Finishing: hemming, crocheted edge, stitched and fringed, applied fringe. Backing: fabric, latex, rubber rings.

Suggested Teacning Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-121

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

32. Observation Skills: Overview of formal and informal observation methods, with experiential applications in informal observation.

Overall Performance Objective: 1) To select and describe formal behavioral observational systems and informal observation techniques related to individual, interpersonal, and group behavioral responses, physical condition, and ability level and 2) to demonstrate and acceptable skill in observing physical and psychosocial behavior in individual, dyad, and group situations, using both formal and informal observation methods.

Related Activities in Occupational Therapy: To observe to report client behavior and behavior change; evaluate client behavior and ability; supervise and analyze staff activity; and interact with other professionals and agency representatives.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a number of observation report forms, list and classify those forms in either objective (measurable) or subjective (judgment) categories.	Objective: ADL evaluation, JROM form, muscle testing chart, etc. Subjective: behavior check list, behavioral description, etc.
2. List and describe categories of physical factors and behaviors which are relevant to client care in occupational therapy.	Vital statistics: age, sex, etc. Physical factors: appearance, diagnosis, etc. Cognitive-perceptual motor factors: gross and fine motor behavior, perceptual behavior, conceptual memory, etc. Social factors: emotional, interactive and group responses, etc. Cultural factors: socio-economic, ethnic, education, work readiness, etc.
3. Given a category of client's physical status, identify and list relevant physical factors which should be observed in order to initiate and maintain appropriate treatment precautions.	Physical status: pressure spots on skin, color of skin and nail beds, sign of fatigue, perspiration, etc.

4. Under the categories of cognitive-perceptual motor abilities, identify and list abilities which should be observed in occupational therapy.	*Gross motor abilities*: range of motion, strength, endurance, coordination, handedness, etc. *Fine motor*: placement, eye-hand coordination, etc. *Perception*: color blind, balance, proprioception, etc. *Recall*: remember instructions, number of steps, recognition of colors, etc. *Comprehension*: able to describe or explain, calculate, add, etc. *Application*: make, draw, perform according to instructions, etc.
5. Given categories of psychosocial behaviors, identify and list relevant behaviors to be observed in each category.	*Emotion-interactive*: irritability, restlessness, tenseness, anxiety, friendliness, withdrawal, out-of-contact, etc. *Social-group role*: leader, follower, disrupter, dissenter, etc.
6. Given categories of cultural factors, identify and list relevant behaviors in each category.	*Value system*: prejudices, ethnic background, etc.
7. Given a variety of situations to observe and purpose for each, list the behaviors or factors he sees, and discuss and compare his list with others who saw the same situation.	*Situation*: individual writes name on paper. *Purpose*: observe motor skills. *Situation*: two individuals deciding which movie they will go to. *Purpose*: observe interpersonal interaction. *Situation*: small group planning a party. *Purpose*: observe group roles.
8. From the list above analyze and select the physical factors and behaviors which can be objectively observed and those which require some subjective judgment and draw a conclusion about these two kinds of judgment.	It's a matter of degree, all observations require some elements of subjective judgment.

9. Identify and list examples of formal observational systems commonly used in occupational therapy.	ADL, developmental evaluations, structured interviews, interactive analysis systems, etc.
10. Identify and list examples of informal observations often made in occupational therapy.	Performance of a task or an activity, social group interactions, apparent emotions, etc.
11. Compare the differences, similarities, and relative usefullness of both types of observation to a variety of situations.	Formal: assessment of behavior or skill level, etc. Informal: assessment of progress, etc.
12. Identify and describe types of informal observation.	Interview, hidden observer, overt observer, etc.
13. Demonstrate an acceptable skill in performing a given number of types of informal observation.	Interview to determine mood and report findings. Observe (unseen) a group of children and note group role of each child. Describe motor behavior of individual placing pegs in peg board.

Suggested Teaching Strategy:

Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:

Completion, p. B-10
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

G & S: 3, p. C-7
PI: 1, p. C-8
F: 28, p. C-33; 92, p. C-46; 114 & 117, p. C-51
References, p. C-122

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

33. Written Communication in Health Care: An overview of the requirements for written communication in the health care system, with experiences in written communication.

Overall Performance Objective: 1) To identify and describe the elements of factual writing required for health care records, reports, and professional correspondence and writing, 2) to define and differentiate among records, reports, and correspondence, the reasons for maintaining reports, records and correspondence, 3) to identify and describe types of administrative and client care reports and records, and 4) to demonstrate an acceptable skill in writing administrative and client care reports, records, and correspondence.

Related Activities in Occupational Therapy: To communicate with staff and referral agencies; facilitate departmental operation; interpret occupational therapy program objectives and goals; document and evaluate program plans and progress; and provide data for special studies and research.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe the elements of communication and factual writing required for written communication commonly appearing in the health care system.	1. The five W's: who, what, when where, why, and how. 2. Thoroughness, conciseness, clarity, brevity, honesty, accuracy, etc.
2. List the types of written communication commonly used in health care settings, explain the purposes of each, and differentiate the purpose of one from the other.	Records, reports, correspondence, etc. Types of Records: client care, administrative, and research. Types of Reports: client care, administrative, research, etc. Purposes: communication with staff, clients, agencies to provide information, administrative control, document client activities, aid in advancement of knowledge, etc. Comply with the law and aid in defense of a claim. Document services rendered or received, justify payment.

3. From given samples, identify types of administrative records and reports and analyze each report or record to determine purpose, format, and organization.	Annual administrative report, progress note, evaluation findings, research report, interdepartmental memo, etc.
4. Analyze client reports or records to determine the organization and essential parts of each.	Aim or purpose of treatment or evaluation. Procedure. Client's response.
5. Identify and describe methods of writing or composing reports and records.	Narrative, structured narrative, charts and graphs, etc.
6. Given a case study, an observation of, or participation in an actual treatment situation, demonstrate an acceptable skill in composing: (a) a record of events. (b) a report of client treatment.	Initial findings, continuing progress, history of treatment, progress and recommendations, etc.
7. Given the assignment of recording minutes of a group meeting, demonstrate an acceptable skill in reporting events and decisions.	Group problem-solving session, discussion to determine treatment plan, etc.
8. Given the task of writing a letter requesting information to an institution or health care professional, demonstrate an acceptable skill in composing the letter.	Letter to affiliation center, letter requesting information concerning services offered, etc.
9. Given a task of writing an article in the style of a journal article, demonstrate an acceptable skill in seeking, finding, and synthesizing information in the area of his interest and composing an article according to a given format.	Perceptual-motor treatment modalities, behavior modification, administrative problem-solving, etc.

Suggested Teaching Strategy:
- Student-Student Group, p. A-7
- Student Independent, p. A-8

Suggested Evaluation:
- Completion, p. B-10
- Essay, p. B-11
- List, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- PI: 16, p. C-10
- References, p. C-122

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

34. Independent Problem-Solving: Applied analysis of personal needs and implementation of techniques to improve personal knowledge and skills.

Overall Performance Objective: 1) To analyze and determine personal knowledge and skill needs, 2) to seek and find resources for meeting those needs, and 3) to implement self-education in the area of need.

Activities Related to Occupational Therapy: To maintain and improve skills and knowledge in occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Analyze his proficiency voids and his interests and determine in what general area he wishes to improve his skills.	ADL instruction, inter-personal relationships, group process, etc.
2. Write a plan for independent study, using previously learned methods of educational planning.	Resources, method, evaluation, etc.
3. Implement the plan by applying appropriate problem-solving behavior.	Reading, discussion, practice, etc.
4. Evaluate the effectiveness of his plan and the usefulness of the information.	Plan feasible? Plan realistic? Information useful? Applicable?

Suggested Teaching Strategy:
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
Observational Techniques, p. B-12

Suggested Resources;
G & S: 2 & 3, p. C-7

35. Community Oriented Problem Solving: Seeking and planning for use of community resources for program planning and implementation.

Overall Performance Objective: 1) To apply problem solving techniques, 2) to identify and describe resources available for client services and program planning or assistance within a given community, and 3) to analyze and determine how and under what circumstances given client or program planning needs might be met by using specific community resources.

Related Activities in Occupational Therapy: To formulate and implement client referrals; guide client in finding community resources to meet his needs; participate in community program planning; recruit, train and make appropriate use of volunteers; consult with institutions to plan activities programs; and seek finding or other assistance from appropriate sources.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given a problem related to assisting a client in finding community resources, apply problem solving techniques to finding the resources and determining the client's eligibility for the resources.	Problems: 1. Client has severe tremor, cannot hold phone receiver, nor dial. 2. Client, age 58, retired, despondent, bored, ambulatory, interested in fishing and stamp collecting - needs to make constructive use of time. 3. A young cerebral palsy adult no longer needs intensive therapy and is too severely involved for vocational training. What can be recommended?
2. Given a problem related to a manpower, equipment, or materials need within an occupational therapy service, apply problem solving techniques to finding the resources and determining how those resources may be obtained or used.	Problems: 1. Occupational therapy department needs four or five wheelchairs of varying sizes with a variety of specifications for specific clients, to demonstrate wheelchair use, and to train clients. Department funds won't cover.

	2. Evening entertainment is needed for a group of hospitalized teenagers. 3. A group of psychiatric clients would like to make toys for a local children's home. Funds are limited.
3. Given the problem of planning a program for volunteers, demonstrate an acceptable skill in composing a plan for orienting, training, and implementing a volunteer program.	Problem: The occupational therapy technician at a geriatric facility for which you are a consultant has stated that many clients spend hours in their room alone, and she has not time to visit each one. Without encouragement and coaxing they will not come to activities programs. The technician would like assistance in planning a "friendly visitor" volunteer program. The administrator thinks it is a good idea, but feels that the volunteers will need careful orientation. He would like the technician to direct the volunteer program.
4. Given the problem of assisting a community agency or group to find resources related to occupational therapy, apply problem solving techniques to finding the resources and planning for instruction in their use.	Problems: 1. A group of elementary school teachers would like to learn how to instruct their students in simple arts and crafts activities using surplus material. 2. A school board would like to find screening devices for perceptual-motor deficits. 3. A community mental health action committee would like to know how occupational therapy would be implemented in a mental health clinic.

Suggested Teaching Strategy:
    Student Independent, p. A-8
    Student-Student Group, p. A-7
Suggested Evaluation:
    Observational Techniques, p. B-12
Suggested Resources:
    References, p. C-122

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION APPLICABLE MODULE

36. Evaluation of Function: An overview of test and measurement theory, the rationale for evaluation in occupational therapy, with applications in selecting and administering evaluation instruments commonly used in occupational therapy.

Overall Performance Objective: 1) To identify and describe theories of test and measurement, 2) to list and describe formal and informal evaluation procedures commonly used in occupational therapy to measure both psychosocial and physical function levels, and 3) to demonstrate an acceptable skill in determining which evaluation procedure might be used in administering given evaluations or tests, in analyzing the evaluation results, and identifying problem areas indicated by the evaluation or test results.

Related Activities in Occupational Therapy: To be able to select appropriate evaluation methods; implement or direct the implementation of their administration; and formulate decisions from the evaluation results.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define and explain the concept of evaluation.	Orderly approach to definition and assessment of problems; must be based on a body of theoretical knowledge; stated objectives; validation; standardization.
2. Describe evaluation processes used in occupational therapy by giving examples of each and discussing when each is appropriate.	Formal: standardized and validated; standardized structured interview; structured observation. Informal: unstructured interview; casual observation.
3. Describe the rationale for evaluation commonly given in occupational therapy.	Evaluate functional assets or strengths; functional capacities as compared with norm.
4. Describe and discuss resources for finding evaluation instruments in occupational therapy.	"Continuing Education Handbook", Willard and Spackman, etc.
5. Given an assignment for finding an evaluation instrument for a specific treatment problem, suggest resources and specific instrument for the problem.	Problems: 1. Depressed housewife not coping well with three children. 2. Six year old child is hyperactive; behavior problem.

	3. Eighteen year old low quadriplegic depressed, can't care for himself, etc.
6. Given overall or general evaluation techniques to be performed on normal individuals, demonstrate an acceptable skill in performing the techniques.	Structured and unstructured interview. Structured and unstructured observations for group interactions; interpersonal interaction; physical capacities, etc.
7. Demonstrate an acceptable skill in reporting findings according to a given format.	Narrative form combination.
8. Given the task of using an evaluation instrument to discriminate between grossly normal and grossly abnormal, demonstrate an acceptable skill in using the screening instrument.	Denver Developmental Screening Evaluation, etc.
9. Compare what was expected with what was found.	
10. Given the task of identifying degrees of deviation from the normal, demonstrate an acceptable skill in administering, scoring, and reporting findings from such an instrument.	Ayers or other perceptual-motor tests.
11. Analyze and describe level of function.	
12. Given the task of using a verbal data collection instrument with a client, demonstrate an acceptable skill in administering the instrument and reporting findings.	Play history, vocational experience, family dynamics, etc.
13. Discuss and describe the difference between testing "normals" and "client".	

14. Given the task of performing given measurements of physical function, demonstrate an acceptable skill in performing and reporting those measurements.	Range of motion, gross and specific muscle tests, coordination and sensory testing, physical signs and symptoms, prosthetic evaluations, etc.
15. Given the task of performing given measurements of psychosocial function, demonstrate an acceptable skill in performing and reporting these measurements or impressions.	Ego functioning, communication, activity analysis, Azima battery, draw a man, etc.
16. Given the task of performing given measurements of skill or function levels which have both physical and psychosocial components, demonstrate and acceptable skill in administering and reporting those measurements.	Activities of Daily Living tests, work readiness evaluations, work habits, work tolerance, interests inventory, homemaking skills, child care skills, etc.
17. Given a number of evaluation situations, apply problem-solving method to select evaluation techniques appropriate to the situation.	Situations: 1. Depressed 72 year old woman who states she can't and doesn't want to do anything. 2. 22 year old paraplegic 4 months post-trauma, etc.
18. Discuss the ethics of evaluation.	Limits of verbal inquiry; how far can you go? With whom do you collaborate? With whom do you share your findings?

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
VT: 5 - 7, p. C-19
F: 19, p. C-31; 25, p. C-32; 26 & 27, p. C-33; 54, p. C-39; 72, p. C-43; 109 & 111, p. C-50; 116, p. C-51
References, p. C-122

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

37. Treatment Planning: An overview of principles of treatment planning, with applications in finding resources for planning.

Overall Performance Objective: 1) To identify, list, and describe the procedural steps for and elements of treatment planning and 2) to demonstrate an acceptable skill in planning appropriate data collection, data analysis, and data synthesis, in determining appropriate long-term goals and immediate objectives, and in designing and documenting implementation procedures for both objectives and goals for a variety of treatment situations.

Related Activities in Occupational Therapy: To evaluate client's level of function and plan therapy program for client.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify the elements of a treatment plan. Explain their purpose and function.	1. Data concerning client's problem and background. 2. Data concerning measurement of level of function. 3. Long-term goals and immediate objectives. 4. Criteria to measure goals and objectives. 5. A plan for implementation of objectives and goals.
2. Describe the procedural steps of treatment planning.	1. Gather data a. Client background and problem. b. Measurement of function. 2. Analyze data a. Overall level of function. b. Client's expectations and needs as he perceives them. 3. Formulate plan or contract with client a. Goals and objectives. b. Criteria. c. Implementation of goals and objectives; (1) activity analysis,

(2) client needs,
(3) available resources, etc.

3. Given vignettes or actual treatment situations, demonstrate an acceptable skill in suggesting resources for performing each of the procedural steps above.

Situations:

1. Large general medical and surgical hospital, new 64 year old stroke patient (2 weeks post-stroke). What data are needed? How do you go about getting them?
2. 72 year old depressed involutional psychotic brought to mental health center on day care basis. Findings show past competence and interest in teaching; physical tremor (mild), poor eye-hand coordination. What will she do all day? How will you go about planning her activities?

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-124

38. Occupational Therapy and Mental Health: Scope, purpose, and objectives of psychiatric occupational therapy, with applications in specific psychosocial dysfunctions and client situations.

Overall Performance Objective: 1) To identify and describe the scope of practice of occupational therapy in mental health, 2) to list and describe therapeutic techniques and methods commonly used in occupational therapy, 3) to state some of the circumstances under which each is used, 4) to identify and describe how interpersonal and group relationships may be used as tools and media, and 5) to demonstrate an acceptable skill in developing a plan for therapy in specific situations.

Related Activities in Occupational Therapy: To plan and implement or direct implementation of therapeutic activities for clients exhibiting psychosocial dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. List the kinds of opportunities or experience which are considered useful in an occupational therapy program for mental health.	Working with individuals who can offer therapeutic relationships, working in task-oriented groups, exploring an activity, exploring and discovering competencies and skills, playing for relationships and for balance, etc.
2. Describe in detail how each of the above is used in occupational therapy.	Dyadic relationships: use of the helping or therapeutic relationship to teach, to mirror the client's behavior, to assume roles needed by client, etc. Use of dynamic groups: for reality testing, for interpersonal sharing, etc.
3. Review and discuss the ego function and describe progressive levels of each ego function.	Reality testing, judgment, etc.
4. For each ego function, structure a series of learning sequences where a given ego function can be strengthened.	Reality testing: 1. Dyadic therapeutic relationship with mirroring behavior on part of therapist.

2. Activities which relate to client's known competencies with later explanation of unknowns.
3. Task group assignment with shared responsibility, if possible, with group that provides positive reinforcement.

5. Given a number of client situations, select the evaluation procedure(s) to be used for each and explain why they are appropriate.

Situations:
1. 22 year old female with anorexia nervosa admitted to acute psychiatric hospital.
2. 19 year old heroin addict who has not had any drugs for 30 days.

6. Given a number of client situations and evaluation results, analyze the evaluation results and formulate treatment goals and objectives.

Situation:
33 year old compulsive middle class white housewife is being sued for divorce by husband and is alienated from teenage children. Evaluation showed very careful reality testing and competence, but very slow housekeeping skills, dismay with any unstructured activity, and bewilderment concerning her children's alienation, etc.

7. Given a number of client treatment situations with goals and objectives for treatment plans:
   (a) Establish evaluation criteria for each objective.
   (b) Establish treatment plans for each objective.
   (c) Discuss how other professions may be involved in treatment and describe the types of collaboration required for each.

Situation:
18 year old black male with delusions of persecution and whose approach to most situations is one of verbal or physical attack. Long-range goal is to establish reality-oriented testing of the environment and to develop appropriate defense mechanisms. Immediate objectives are to prohibit physical attack and to encourage appropriate expression of feeling.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent p. A-8

Suggested Evaluation:
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 25, p. C-12
F: 1, 2 & 5, p. C-28; 7 & 9, p. C-29; 30, p. C-33; 32, p. C-34; 39, p. C-35; 41, p. C-36; 55 & 56, p. C-39; 58 & 61, p. C-40; 74, p. C-42; 82, p. C-44; 90 & 93, p. C-46; 98 & 99, p. C-47; 105, p. C-49; 113, p. C-51; 121, p. C-52
References, p. C-124

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

39. The Helping Relationship: Discussion and differentation of the therapeutic relationship with applications in selecting and maintaining attitudes and roles.

Overall Performance Objective: 1) To describe and discuss the dyadic therapeutic or helping relationship, 2) to differentiate this relationship from other types of relationships, and 3) to demonstrate an acceptable skill in determining, selecting, and maintaining relationships appropriate to given therapeutic goals.

Related Activities in Occupational Therapy: To assume appropriate helping relationships with clients.

Suggested Objectives:	Examples:
The Learner Should:	
1. List and describe types of dyadic relationships and discuss normal roles and attitudes common to each.	Adult-child, child-adult, child-child, adult-adult, etc.
2. List and describe therapeutic roles, including normal attitudes and behavior exhibited in these roles, and explain when each is appropriate.	Parent-teacher, parent-authoritarian, peer-friend, etc.
3. List and describe roles frequently assumed by clients in relation to the helping person and explain when each is inappropriate.	Child-dependent, child-resistive, peer-confider, etc.
4. Identify and explain how to determine roles and behaviors beneficial to client.	1. Obtain information about client presenting problem through evaluation. 2. Establish contract with client: a. what he perceives he needs b. what you perceive he needs c. negotiation d. resolution

5.	Given client situations, demonstrate an acceptable skill in determining appropriate role(s) and behaviors for each situation.	Situation: Dependent client, low self-esteem, looks to therapist to make decisions for him, needs excessive approval for each successful task, becomes despondent with failure, etc.
6.	Compare and contrast the helping relationship with other relationships in occupational therapy practice.	Supervisory relationship, supervisee relationship, co-worker relationship, consultant relationship, etc.
7.	Describe and discuss therapeutic interpersonal relationship techniques and attitudes which may alter, inhibit or facilitate various types of relationships and describe their effects on each type.	Counseling techniques, interviewing, receptive listening, non-directiveness, directiveness, behavior modification techniques, positive reinforcement, non-reinforcement of negative behavior confrontation, therapeutic attitudes, firm kindness, permissiveness, etc.
8.	Demonstrate an acceptable skill in assuming behavior required for a given number of therapeutic interrelationship techniques.	
9.	Given a number of client situations, demonstrate an acceptable skill in selecting and maintaining roles and attitudes appropriate to the situation.	Situations: 1. Child under situational stress acting out by striking therapist and other children. 2. Depressed, withdrawn woman who sits quietly in a corner by herself, etc.
10.	Name and discuss roles and relationships usually developed by other health professionals with clients and describe how those roles may be complementary or supplementary to the occupational therapist.	Psychiatrist, social worker, nurse, psychologist, etc. Collaboration and teamwork are required.

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:

Essay, p. B-11

Observational Techniques, p. B-12

Suggested Resources:

VT: 3, p. C-18

F: 82, p. C-44; 121, p. C-52

References, p. C-126

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

40. Occupational Therapy in Geriatrics: Overview of the developmental phase and life tasks of aging individuals, their social treatment and needs with applications in occupational therapy.

Overall Performance Objective: 1) To review and discuss the normal developmental phase and life tasks of aging individuals, 2) to identify past, current, and potential future social treatment of the aged, 3) to describe the primary needs of aging individuals, 4) to describe principles of occupational therapy for aging individuals, and 5) to demonstrate an acceptable skill in determining individual or group occupational therapy programs in a variety of settings.

Related Activities in Occupational Therapy: To plan and direct occupational therapy programs for aging populations and consult with institutions or agencies which provide service to the aged.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review, describe, and discuss the developmental dynamics of aging.	Physical system: less efficient, increased health problems, etc. CPM: matured system begins to lose some of it's speed, learning still occurs but more slowly, etc. Social: old friends, family, extended family, emotional, liability, etc. Cultural: may be isolated, ignored, etc.
2. Identify and discuss the life tasks of the aging individual.	Meaningful use of leisure time, finding status in something other than work, preparation for death, etc.
3. Identify and discuss past and current social treatment of the aged.	From venerating to ignoring with current spotlight on aging, a changing population, changing attitudes, etc.
4. Compare and contrast the current aging population with the potential future aging population.	Factors: Size, education, health, demography, social force, expectations, etc.

5. Describe and discuss the primary needs of aging individuals.	Independence: economic, physical, social. Health care: preventive, restorative, maintenance. Identification with the community.
6. Describe and explain the principles of occupational therapy for aging individuals and give examples of each.	1. Evaluation and determination of assets, functional and social skills. 2. Development of listening, respecting, cooperating relationship. 3. Use of the aging client as a resource for planning, use his skills and interests. 5. Be involved and knowledgeable about community resources and use them to as a resource for the client.
7. Given a number of client situations in a variety of settings, demonstrate an acceptable skill in planning programs appropriate to client needs.	Situation: Aged gentleman of 84 years, in the past was a truck driver, retired for 25 years. Health adequate, is very thin, does not eat well, and states that the food in the nursing home is terrible Past interest and hobbies: stock car racing, mechanics, tinkering, bar hopping, and fighting. Current interests: visiting the local bar (not permitted) and watching young ladies.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
G & S: 2 & 3, p. C-7
F: 3, p. C-28; 58, p. C-40; 73, p. C-43; 89, p. C-46
104, p. C-49
References, p. C-126

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

41. Occupational Therapy for the Restoration of Physical Function: Scope, purposes, and objectives of occupational therapy in physical disabilities, with applications in specific physical dysfunctions and client situations.

Overall Performance Objective: 1) To identify and describe the "whole person philosophy", 2) to identify principles of therapeutic exercises, 3) to apply both to planning treatment to facilitate the restoration and maintenance of physical function, 4) to demonstrate an acceptable skill in selecting and designing therapeutic motor activities, and 5) to develop a plan for therapy for specific situations.

Related Activities in Occupational Therapy: To formulate and implement or supervise the implementation of therapeutic motor activities programs for clients with physical dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. Describe the "whole person philosophy" and discuss how it relates to planning for treatment of physical disabilities in occupational therapy.	The person with a physical disability is a whole person who is involved in the total human developmental process. All developmental needs must be considered in planning treatment.
2. List the kinds of opportunity or experience which should be provided in an occupational therapy program for physical disabilities.	Therapeutic exercise, retraining in activities of daily living, development of work tolerance, etc.
3. Describe in detail how each type of experience is used and give specific examples of situations in which each is used.	Therapeutic exercise to facilitate regaining of physical function, etc.
4. Describe treatment techniques or methods which are usually used to provide the above experiences in occupational therapy.	Use of activity for therapeutic exercise, assistive or orthotic devices, etc.

5. Identify what are considered to be the major objectives of therapeutic exercise and explain what each means.	Range of motion, strength, endurance, coordination, muscle re-education, etc.
6. For each objective, list and describe the techniques or methods usually performed in occupational therapy which may be used to obtain each objective.	Range of motion - passive, active, stretching, practice. Strength - isometric, isotonic exercise, maximal effort for short repetitive periods. Endurance - moderate effort for longer periods, effects of practice, etc. Coordination - many types, effects of learning and practice. Muscle re-education - Rood, Bobath Brunstrom, PHF techniques.
7. List and describe the types of physical disability which might require therapeutic exercise, and identify the types of exericse appropriate for each.	Arthritis - ROM, strenght, endurance. CP - muscle re-education. Hemiplegia Spinal Cord Injury
8. For each therapeutic exericse technique, apply problem solving and activity analysis techniques to determine ways in which activities may be used as therapeutic exercise media and give examples of each.	ROM - activities which require stretching and reaching out the affected part such as using hand platen press for forward humeral flexion, etc. Muscle re-education - sanding, pulling, leather lacing in re-education patterns, etc.
9. Identify and discuss how activities may be adapted to elicit the desired exercise objective and give examples of each activity and its adaption.	By placement, by additions to or adaptions of equipment, etc. Examples: Elevating macrame or cord knotting so that shoulder motions are required, weighting loom beam, etc.
10. Given specific exercise objectives, analyze the objective and describe a number of activities and adaptations which could be used.	Objectives: Increase voluntary "m.i.p." joint extension from 90 to at least 60 degrees in an arthritic hand. Improve strength of upper arm and shoulder girdle muscles in paraplegic from fair to good.

11. Describe and discuss instance when substitute motion should be used and give examples of each.	Instances and Examples: When specific losses are permanant; when specific losses are temporary in order to maintain skill until specific function can be regained; e.g., self-feeding, using adapted device for larger grasp, etc.
12. Compare the psychological dynamics of a traumatic severe disability with a chronic disability.	Denial, grief, withdrawal, acceptance, etc.
13. Describe the impact upon normal development of a variety of physical disabilities on individuals in varying life phases and socio-cultural situations.	Situation: Child with severe CP on family dynamics, spinal cord injury on a 12 year old boy, multiple sclerosis on a thirty year old housewife, etc.
14. Given a number of client situations select the evaluation procedure(s) to be used and explain why they are appropriate.	Situation: Spinal cord injury, at level of CS on T1; adult male, age 21, motorcycle accident, three weeks post-trauma, cheerful and outgoing, etc.
15. Given a number of client situations and evaluation results, analyze the evaluation results and formulate treatment objectives.	Situation: 62 year old hemiplegic male, 6 weeks post CVA; owner and pharmacist of prosperous drug store in small community. Is not ambulatory with cane, has gross sensory losses in right upper extremity, no voluntary motion in right arm, very mild expressive aphasia, etc.
16. Given a number of client treatment situations, with goals and objectives for treatment plans: (a) establish evaluative criteria for each objective (b) establish treatment implementation plans for each objective	Situations include: Vignette or case studies which include a variety of developmental and dysfunction components, a variety of setting, etc.

(c) discuss how other professions may be involved in the situation and describe the types of collaboration required for each situation.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
S: 2 & 8, p. C-16
FS: 8, p. C-25
F: 4, p. C-28; 25, p. C-32; 26 & 27, p. C-33; 52 - 54, p. C-39; 72, p. C-43; 78 & 79, p. C-44; 95, p. C-47; 102, 103 & 106, p. C-49
References, p. C-127

42. Sensorimotor and Cognitive-Perceptual-Motor Treatment Approaches: Overview and review of neuroanatomical and neurophysiological treatment approaches, sensorimotor treatment approaches, and cognitive-perceptual-motor adaptive patterns with applications in occupational therapy.

Overall Performance Objective: 1) To review neuroanatomical and neurophysiological factors relevant to sensorimotor and cognitive-perceptual motor (CPM) treatment principles, 2) to identify, describe, and demonstrate an acceptable skill in applying sensorimotor treatment methods, 3) to define and describe the continuum of CPM development, 4) to describe various CPM dysfunctions and symptom complexes and describe the developmental origins of each, 5) to describe the components of CPM evaluation and develop an acceptable skill in each component, and 6) to describe treatment principles for CPM dysfunction and demonstrate an acceptable skill in designing appropriate treatment programs.

Related Activities in Occupational Therapy: To plan and implement or direct the implementation of therapeutic activities for perceptual-motor dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review the morphology and function of the nervous system.	Systems, neuron unit, types of neurons, spinal tracts, receptor-effector dynamics, etc.
2. Describe in detail the dynamics of stimuli reception, transmission and neuromuscular response.	Exteroceptive, proprioceptive, interoceptive and response systems, etc.
3. Given sensorimotor treatment approaches, describe them in terms of author or inventor and underlying principles and methodology.	Neuromuscular reflex therapy, PNF, neurodevelopmental approach, Brunnstrom, neurophysiological approach, orthokinetics, etc.
4. Given client situations, select the treatment approach(s) which might be appropriate and state reasons.	Situations: Client with minimal cortical control or control of motion. Client with cortical control, but weak, uncoordinated motion, etc.

5.	Demonstrate an acceptable skill in selecting and applying treatment techniques to given client situations.	Imbalance between agonist and antogonist muscle groups, hemiplegic arm, extensor thrust reaction in 18 month old, etc.
6.	Define the term "Cognitive-Perceptual-Motor behavior (CPM)".	Process of integration, accomodation, and adaptation; four characteristics, etc.
7.	Describe in detail the dynamic continuum of development of the CPM process.	Reflex development, postural reactions, body schema development, etc.
8.	Define the term "CPM dysfunction".	Inability to adapt and to integrate environmental experiences.
9.	Describe given CPM dysfunction complexes and discuss their possible developmental origin.	Dysfunctions in visual discrimination, proprioceptive visual-motor accomodation, etc.
10.	Describe the components of a CPM evaluation.	Special tests, observations, interview, and developmental history, etc.
11.	Demonstrate an acceptable skill in performing each evaluation component.	
12.	Describe a treatment rationale for CPM dysfunction.	Change in sensorimotor integration will enable more effective adaptation, brought about by controlled sensory input followed by purposeful motor output, etc.
13.	Describe and explain the principles for treatment of CPM dysfunction, and give examples of the application of each principle.	Thorough evaluation and analysis of findings, plan treatment according to developmental continuum, based and dependent upon intersensory integration, communication, and coordination with family, community, and other professionals, etc.
14.	Given a number of client situations and evaluation results, determine the goals, objectives, criteria, and specific implementation plans for each situation.	Situation: Poor body schema and apraxis in 6 year old cerebral palsied child (moderately involved quadreplegic athetosis, etc.

Suggested Teaching Strategy:
- Student-Student Group, p. A-7
- Teacher-Student Group, p. A-6

Suggested Evaluation:
- Completion, p. B-10
- Essay, p. B-11
- Observational Techniques, p. B-12

Suggested Resources:
- VT: 16, p. C-21; 25, p. C-32
- F: 27, p. C-33; 74, p. C-43; 93, p. C-46; 94, p. C-47: 111, p. C-50; 113 & 116 p. C-51
- References, p. C-130

43. Prosthetic Training: Principles and methods of training upper extremity amputees to control and use a prosthetic device.

Overall Performance Objective: 1) To name and describe types of upper extremity amputations, 2) to name and describe types of prosthetic devices, the parts of devices, and their function, 3) to list and describe the procedures used by the medical team in providing a device for a client, 4) to state where and how occupational therapy may be involved in each procedure, and 5) to demonstrate an acceptable skill in planning preprosthetic training procedures, in administering prosthetic check-out procedures, and teaching another individual to control and use the device.

Related Activities in Occupational Therapy: To assist in prosthetic evaluation and plan and implement, or direct occupational therapy staff to implement, client's prosthetic training.

Suggested Objectives:	Examples:
The Learner Should:	
1. List common upper extremity amputations and classify each by level and etiology.	Congential amputations: amelia hemimelias, phocomelias, etc. Traumatic or surgical amputations: transmetacarpal, wrist disarticulate, below elbow, above elbow, etc.
2. Name and describe common types of prosthetic devices, and describe for which type of amputation they are most frequently used.	BE, AE, Cineplasty for amputations by level, etc.
3. Recognize the parts of each type of prosthetic device and describe the function and common varieties of each.	Harness, socket, elbow unit, terminal device, wrist unit, etc.
4. Describe the procedures used by a medical team in providing a client with a prosthetic device and the role played by each professional group in each procedure.	1. Evaluation of need - physical and psychosocial. 2. Determination and prescription for device. 3. Physical and psychosocial preparation of client. 4. Device fabrication.

	5. Evaluation of device function. 6. Control training. 7. Use training. 8. Evaluation of usefullness to client.
5. Describe and discuss the impact of an amputation and use of a prosthetic device upon an individual's physical, psychosocial, social, and cultural status during a variety of life phases.	Congential amputations may alter overall development; problem of social acceptability in some ethnic or socio-economic groups; etc.
6. Discuss the implications of the above impacts upon usefullness, choice, design, and training for device.	Consider: vocational use, cosmesis, age of client, amount of function gained versus sensitivity loss, etc.
7. Identify and describe procedures commonly used in pre-prosthetic training in occupational therapy and apply methods of instruction to teach another individual to perform the procedures.	Stump desensitization, stump strengthening, etc.
8. Identify and describe the procedures commonly used in prosthetic device check-out and practice those procedures on a sample device.	Harness function, efficiency of device, power, TD opening, etc.
9. Identify and describe the procedures which the client must use to control the device and teach another individual to control given parts of a specific prosthetic device.	Elbow flexion, TD opening, TD to mouth, open and closed, etc.
10. Identify and describe in his own words the procedures commonly used in "use" training in occupational therapy and teach another individual to use the device in given activities.	Carry paper cup in TD, pick up and use fork, handle wallet, tie shoes, etc.
11. Given a number of client situations, demonstrate an acceptable skill in designing an appropriate training program for the situation.	Situations: 1. Six year old traumatic amputee with 3" long BE stump has suction socket BE prosthetic device with voluntary

opening TD. Will be going to school (1st grade next year) Plan control and use training.

2. 40 year old ex-truck driver with short AE stump. What sort of evaluations are needed in occupational therapy?

Suggested Teaching Strategy:
  Student-Student Group, p. A-7
  Teacher-Student Group, p. A-6

Suggested Evaluation:
  Matching, p. B-9
  Essay, p. B-11
  List, p. B-11
  Observational Techniques, p. B-12

Suggested Resources:
  F: 15, p. C-30; 115, p. C-51
  References, p. C-132

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INFORMATION-APPLICATION MODULE

44. Orthotic Design and Training: Identification of purpose, types, parts, and functions of splints, slings, and supportive devices with applications in evaluation of need, design, and use training.

Overall Performance Objective: 1) To describe the purposes, types, and parts of orthotic devices, 2) to describe criteria for proper fit, design, and determination of need for device, 3) to describe and discuss limitations for splint design by occupational therapists, 4) to describe factors in orthotic design which may injure or disable clients,

Related Activities in Occupational Therapy: To evaluate client's need for device; design, construct, or direct construction of device; train in use of device; and evaluate its effectiveness.

Suggested Objectives:	Examples:
The Learner Should:	
1. Describe the purpose of orthotic devices.	Support of weakened segments, assist function, control or stabilization of joints, prevention of deformity, prevention of substitution, facilitation, etc.
2. Define the terms "static" and "dynamic" as they relate to orthotic devices.	Static: without motion. Dynamic: permit, encourage, or assist motion.
3. From given samples of both types of device, recognize and name a given number of kinds of each, and state the purpose(s) of each.	Resting pan, cock up, opponens cuff, flexor hinge, tenodesis assist, balanced forearm, orthesis, suspension, sling.
4. Identify the parts of a number of devices by name and state their use and function.	C bar, ADL unit, outrigger, elbow unit, etc.
5. Describe the difference between assistive and orthotic devices.	The assistive device is an adaptation of standard objects of daily use; orthosis enables client to handle standard devices.

6.	Describe the criteria for proper fit of an orthotic device.	Criteria: Anatomical bone and muscle alignment, fit and maintenance of arches, contour of hand, allowance for or stability of required motion, stabilization or anchoring in three points, alleviation of pressure points, skin protection, etc.
7.	Describe factors in orthotic design which may injure or disable clients.	Skin allergies, skin abrasions, skin pressure, over-stretching weakened muscles, tearing grafted skin, etc.
8.	Demonstrate an acceptable skill in fitting a standard orthotic device to another individual.	Balanced forearm orthsis, suspension slings, cock-up splint, tenodsis assist, etc.
9.	Describe the criteria for effective evaluation of need for orthotic device.	Willingness of client to use it; bulk and weight vs. improved function; increased function vs. nuisance value; cleanliness; Cosmesis; etc.
10.	List the professions involved in working with devices and explain the role and function of each.	Physician, Orthotist, Therapist, etc.
11.	Describe the types of orthotic devices most commonly designed or adapted by occupational therapist.	Pan splints, cock-up splints, opponens cuffs, extensor assists, etc.
12.	Describe the types of orthosis commercially available and identify resources for obtaining a given number or types.	Balanced forearm orthosis, wrist orthosis, forearm orthosis, etc.
13.	Describe the types of devices most commonly fabricated and fitted by an orthotist.	Flexor hinge, tendoesis, etc.
14.	Discuss and describe the advantages and disadvantages of device design by occupational therapists.	Time, cost, cosmesis, availability, etc.

15. List and describe materials frequently used in construction of orthotic devices by occupational therapists and state the purposes of each type of material.	Moleskin, plastics, wire, rivets, snaps, "velcro", etc.
16. List appropriate properties of each material listed above.	Flexibility, porousness, forming temperature, contourability vs. regidity or strength, etc.
17. List and describe tools used in construction and state the use of each.	Heat gun, hot water bath, wire benders and cutters, rivet gun, soddering iron, etc.
18. Given a client situation requiring design and fitting of a simple device, demonstrate an acceptable skill in designing, fabricating, and fitting the device.	Situation: Splint hand with 3rd degree burns on dorsum in neutral position.
19. Given a client situation requiring modification of a commercially available device, demonstrate an acceptable skill in modifying and fitting the device.	Situation: Fit long opponens splint to client with complete loss of wrist function.
20. Given a client situation requiring training in use of a device, demonstrate an acceptable skill in training an individual to use the device and in evaluating device effectiveness.	Situation: Teach quadriplegic to put on, remove, and use tenodesis splint.

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 35, p. C-14
VT: 10 & 11, p. C-20
F: 52, p. C-39; 62, p. C-41
References, p. C-132

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INFORMATION-APPLICATION MODULE

45. Activities of Daily Living Habilitation: Overview of scope and relevancy of activities of daily living, a review of factors which inhibit independent function with applications in treatment planning and implementation.

Overall Performance Objective: 1) To describe the scope and relevance of activities of daily living (ADL) to all clients, 2) to identify physical, cognitive-perceptual-motor, social, and cultural factors which inhibit independent functions, 3) to analyze the developmental components of ADL, 4) to describe devices which assist the client in ADL, 5) to develop skill in designing devices and planning for their use, 6) to demonstrate an ability to design and plan remediation programs in ADL, and 7) to demonstrate the ability to teach ADL activities to individuals exhibiting a variety of psychosocial and/or physical problems.

Related Activities in Occupational Therapy: To plan, implement, or direct occupational therapy programs relevant to client needs and development level.

Suggested Objectives:	Examples:
The Learner Should:	
1. Describe and discuss the meaning of independent ADL function to the normal adult human being.	Taken for granted; learned in childhood; level of compulsiveness concerning personal hygiene varies with culture, personality, social requirements, etc.
2. Describe and discuss extrinsic or intrinsic interruptive factors in normal human development which inhibit ADL function.	Physical: congenital, disability may never learn some skills, etc. Acquired: may be dismayed at loss of skill, etc. CPM: may not be developmentally ready, may have developmental lag or may be mentally retarded, etc. Social: may be regressed, disoriented, etc. Cultural: may be act of defiance, may not be part of cultural standard, etc.

3.	Describe specific problems of given diagnostic groups of symptom complexes which inhibit ADL function, and give examples of the kinds of function inhibited.	Cerebral Palsy, hemiplegia, spiral cord injuries, character Character disorders, thought disorders, behavior disorders, etc.
4.	Given a number of ADL tasks, apply activity analysis techniques to determine the developmental components of each task.	Self-feeding, toileting, grooming, transfer, ambulation, etc.
5.	Identify the classifications of and describe devices used to assist physically disabled clients in ADL independence.	Assistive device, orthotic devices, etc.
6.	From given samples, name and state the purpose and use of a number of devices.	Adapted eating utensils, holding or carrying devices, BFO, splints, suspension slings, ADL units, etc.
7.	Describe and discuss the criteria for client use of an assistive device.	Functional need rather than disability; acceptability to client; improved function vs. nuisance value; value to client in home setting; cost; etc.
8.	Describe and discuss the criteria for effective device design.	Durability, simplicity, cosmesis, efficiency for specific client, etc.
9.	Given a number of commercially available devices, analyze the design and function of the device and determine for which functional problems and ADL tasks it might be useful.	
10.	Given a number of functional problems and ADL tasks analyze the problem and determine what device(s) should be used and design or adapt a device as required.	Problems: Moderate loss of hook grasp, and writing; eating; partial stability of wrist; loss of elbow function; putting on pants; etc.

11. Given a number of client problems and evaluation results, demonstrate an acceptable skill in planning remedial ADL programs.

Problems:

Severely regressed client with thought disorder does not perform any grooming activities, but does dress self in sloppy fashion, practices careless toilet habits.

72 year old right hemiplegic woman with gross sensory deficits and poor ambulation. Has expressed desire to be able to dress and bathe herself.

12. Given a client problem and an ADL objective, demonstrate an acceptable ability to plan instruction, select necessary devices and teach an individual with that problem to perform a given ADL objective.

Problems:

Teach right hemiplegic to put on shirt, teach quadplegic to feed self, teach short AE amputee to get money from wallet, teach arthritic with severe ulnar deviation to put on and fasten clothing, teach mentally retarded child (CA5, MA2) to put on coat, teach disoriented individual to feed self, teach obsessive-compulsive person (chronic hand washer) to dress self in reasonable amount of time (now requires two hours), etc.

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:

Matching, p. B-9
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

S: 7, p. C-16
VT: 13, p. C-20
F: 8, p. C-29; 37 & 40, p. C-35; 52, p. C-39; 87, p. C-45; 102, p. C-49; 119, p. C-51
References, p. C-135

46. Training for Vocational Readiness: Overview of the meaning of work, the development of vocational competencies and choice, with application in training for vocational readiness competencies in occupational therapy.

Overall Performance Objective: 1) To discuss and analyze the meaning of work to adults, 2) to identify vocational readiness competencies and trace their development, 3) to describe the dynamics of vocational choice on the developmental continuum, and discuss factors which influence vocational choice, 4) to describe intrinsic and extrinsic factors which inhibit vocational training, and 5) to demonstrate an acceptable skill in evaluating and planning training programs for, and instructing individuals with a variety of problems in, a variety of vocational readiness activities.

Related Activities in Occupational Therapy: To plan, implement or direct occupational therapy programs relevant to client needs and developmental level.

Suggested Objectives:	Examples:
The Learner Should:	
1. Discuss and analyze the meaning of work to the normal adult.	Work: gives value in eyes of others, can give meaning to life, etc.
2. List and describe the normal vocational readiness competencies, and briefly trace their development on the developmental continuum.	Physical tolerance and capacities, work adjustment, work habits, work attitudes, work relationships, etc.
3. Describe the dynamics of vocational choice on the developmental continuum.	Made during the adolescent identify crisis but begins in early childhood.
4. Describe and discuss factors which influence vocational choice.	Innate skills, education, exposure to vocations, cultural and social expectations, etc.
5. Describe intrinsic and extrinsic factors which inhibit or prohibit vocational readiness and give examples of each.	Intrinsic: physical disability, intellectual ability, emotional immaturity, poor enculturation, etc.

	Extrinsic: physical or architectual barriers, non-work oriented ethnic or cultural environment, etc.
6. Describe the relationale or purposes of vocational readiness training usually presented in occupational therapy.	Occupational therapy is concerned with the individual's ability to plan and cope with his life - to develop work-related skills and attitudes as an essential part of the continuum of life tasks in our culture.
7. Identify and describe other professions and professional groups who are concerned with vocational readiness and give examples of their roles in vocational preparation and training.	Vocational counselors, physcians, social workers, prosthetist, physical therapists, etc.
8. Compare and contrast the roles and functions of occupational therapists and other professions in vocational training.	
9. Describe, explain, and give examples of the principles of vocational readiness training.	1. Evaluation of functional assets as well as liabilities. 2. Client must be involved in planning, there should be negotiation and contract for learning. 3. In order to reduce intrinsic impediments to vocational readiness, the training should follow the normal developmental continuum. 4. In order to reduce extrinsic impediments, the resources available in the community and the client's environment must be utilized.

10. Given a number of client situations, demonstrate an acceptable skill in planning and selecting evaluation procedures appropriate to each situation.	Situation: Severe burnt-out JRA client, age 22, illiterate, environmentally and educationally deprived.
11. Given a number of client situations, evaluation results, and settings, demonstrate an acceptable skill in planning objectives, goals, and initial treatment plans.	Situation: Female paraplegic, 24 years old, with good strength in upper extremities, adequate emotional stability and excellent interpersonal skills, is motivated to return to homemaking activities and child care for children aged 7 months and 3 years.
12. Given a number of client problems and treatment objectives, demonstrate an acceptable skill in planning instruction and teaching another individual to perform the activity.	Problems: Teach hemiplegic woman to make bed. Teach intellectually gifted individual with thought disorder to develop adequate work habits.

Suggested Teaching Strategy:

Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:

Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

F: 19, p. C-31; 32, p. C-34; 40, p. C-35; 87, p. C-45; 100, p. C-48; 119, p. C-46
References, p. C-136

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

47. Applied Research in Occupational Therapy: A brief overview of research design with application in occupational therapy.

Overall Performance Objective: 1) To identify the types of research, 2) to describe and differentiate the objectives or purposes, procedural steps, advantages, and disadvantages of each type of research, and 3) to demonstrate an acceptable skill in planning, implementing, and evaluating a research project.

Related Activities in Occupational Therapy: To read and comprehend research findings and assist in developing and implementing occupational therapy research projects which validate or negate occupational therapy theory or techniques.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe types of research.	Experimental, non-experimental, etc.
2. Identify the limitations, constraints and advantages of each.	Experimental research is more precise, but difficult to use to measure behavioral response or opinion, difficult to limit variables, etc.
3. Identify the types of non-experimental design and describe each.	Case studies, survey research, correlational studies, field studies, descriptive studies, longitudinal studies, etc.
4. Identify the procedural steps in research and describe each.	Statement of problem, hypotheses; related information search; procedural design; analysis or results, and conclusions and recommendations.
5. Given a number of appropriate journal articles or research reports, identify the procedural steps in each.	

6. Define statistical terminology frequently used in research reports.

   Mean
   Median
   Mode
   Standard deviation
   Q-sort
   Significance

7. Given a number of research reports, identify specific statistical terminology and state its meaning according to that report.

8. Demonstrate an acceptable skill in designing, planning, implementing, evaluating, and reporting a short-term research problem or project in the learner's area of interest.

Suggested Teaching Strategy:
Student-Student Group, p, A-7
Student Independent, p. A-8

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 11, p. C-9; 12 & 15, p. C-10; 39, p. C-15
References, p. C-138

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

48. Program Management Skills: An overview of organization and administration of an occupational therapy service or unit, with applications in selected administrative functions.

Overall Performance Objective: 1) To identify and describe the principles of organization and administration required for managing occupational therapy services, 2) to identify and describe the tasks or duties required for program management, analyze those tasks, and list managerial skills required by those tasks, and 3) given management tasks to apply a problem solving method to plan procedural steps for performing each task.

Related Activities in Occupational Therapy: To direct and supervise occupational therapy services and coordinate occupational therapy services with other services.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "organization".	Structure within which two or more individuals contribute efforts to accomplish a purpose.
2. List and describe the components or structure of an organization.	System of human effort. Purpose or goal. Means of communication.
3. Describe and give examples of principles of organization.	Central control should be established. Supervisory and executive relationships clearly defined. Responsibility delegated, etc.
4. Describe types of organizational structure and, given organizational charts, identify which type(s) of organization is (are) depicted.	Line, staff, functional, etc.
5. Define "administration" in his own words.	

6. Given principles of administration, define what they mean and give examples of each.	Central authority, proper personnel, oriented personnel, delegated authority, communication, evaluation, etc.
7. List and describe the organizational components of an occupational therapy department.	Stated Purposes, Functions, and Policies Structure: Physical: plant, equipment, supplies, etc. Managerial: staff, internal and external lines of authority, etc. System: Personnel: operations, duties, schedules, etc. Financial: budget, acquisitions, purchasing, etc. Maintenance of equipment and supplies. Communication: Lines of, means of, verbal and non-verbal, education, etc.
8. Given a job description of an occupational therapist involved in organizational and administrative tasks, analyze and describe the skills and abilities required to perform those administrative duties.	Making decisions to schedule staff, to make policy, etc. Communication skills, sensitivity to people, etc.
9. Identify and discuss the legal implications of liability involved in providing occupational therapy services to clients.	Misfeasance, malfeasance, documentation, etc.
10. Given an administrative problem, apply problem solving techniques to analyze, propose solutions, and compose a plan for solving the problem.	Problems: 1. Physician walks into a treatment session when occupational therapy technician is teaching client to put on his shirt, and begins to examine client. Technician is fit to be tied. What do you, as her supervisor, do?

2. Jig saw blade has snapped and cut client on arm. What preventive and legal measures should be taken?
3. Technician says, "I don't see any difference between what the therapist does and the technician does."
4. The department is a mess - surfaces are cluttered, and staff are complaining that they can't find anything, each says the others don't put things away.
5. The case load for one technician is very low, for another is too high, but they don't get along well.
6. A new employee is coming tomorrow. You have your work schedule already planned for him. How will you orient him?
7. Your administrator has asked you to determine the cost per hour per client for services. What information do you need? How will you use it?
8. You have run out of construction paper, enamel and clay again. This is the second time this month. What should you do to prevent the situation?

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
F: 45, p. C-37; 63, p. C-42; 71; p. C-43
References, p. C-138

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION-APPLICATION MODULE

49. Program Planning: An overview of the procedures for and requirements of an occupational therapy program with applications in general activities program planning.

Overall Performance Objective: 1) To identify and describe the procedural steps involved in planning an occupational therapy program; 2) to identify and describe the requirements for an occupational therapy program in a variety of settings; and 3) given specific program development assignments for activities programs, to demonstrate an acceptable skill in applying problem solving techniques to list the specific procedural steps required for planning Activities programs in a variety of settings.

Related Activities in Occupational Therapy: To plan activities programs for consultee agencies and revise, reorganize, and coordinate ongoing occupational therapy programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify the procedural steps required for planning a new program.	Surveys, interviews, and other analyses for planning.
2. Describe methods which may be used in each procedure and state the purpose of each.	Surveys: Survey of clients' records and charts to determine type and needs of client population. Survey of staff to determine staff's perception of occupational therapy needs. Survey of policies to determine limitations and restrictions, etc. Interviews: Clients: determine interests and needs. Administrative staff: determine administrative structure, record keeping, budget, etc. Analysis: Identify needs. Identify limitations and restrictions. Identify resources.

3. Identify the essential parts of a program plan; describe each part; and explain how each contributes to the whole.

Setting: type of institution.
Size of institution: size of caseload.
Personnel
Physical plant: location, size layout.
Supplies and equipment
Budgets
Fees or income
Policies, objectives: scope of caseload, services, administrative direction, qualifications of personnel, educational contributions, personnel policies.
Administrative records and reports

4. Given specific information concerning a potential program, the learner will project a program plan including all of the parts above.

Examples of information: type of health care facility; size and location of community; majority, minority, racial, ethnic, religious, age groups to be served; mobility of client population; availability and quality of other health care facilities; statistics on the frequency of the primary diagnosis; availability and sources of funding; administrative and voluntary hierarchy; etc.

Examples of assignment:

1. Plan an activities program for a small (28 residents) ghetto nursing home of primarily black welfare recipients, using available nurse aides and volunteers from a nearby church to staff it. Funds are limited to approximately 20 cents per person per day. A sunroom lounge is available and the dining room may be used part-time, etc.
2. Plan a play-room program for a children's ward in a community hospital to be staffed by nursing staff, students, volunteers, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
F: 12, p. C-30; 71, p. C-43
References, p. C-139

PREPARATION FOR OCCUPATIONAL THERAPIST

INFORMATION APPLICATION MODULE

50. Supervision Skills: Overview of principles and methods involved in supervision.

Overall Performance Objective: 1) To identify and describe principles and techniques of superivsion and 2) to demonstrate an acceptable skill in performing each supervisory technique.

Related Activities in Occupational Therapy: To direct, guide and teach staff, volunteers and others in treatment implementation and related work activities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe the purposes and goals of supervision.	Implementation of program objectives, growth and development of supervisee, etc.
2. Describe the role of the supervisee and the supervisor.	Supervisee: implementor, helper, learner, etc. Supervisor: planner, teacher, director, change agent, etc.
3. Compare and contrast the concepts of administration, supervision, and therapy.	Administration: getting things done through people. Supervision: direction of people to get things done. Therapy: the treatment of disease.
4. Describe the supervisory process.	1. Determining the contract. 2. Indoctrination of personnel. 3. Delegation of responsibility. 4. Assessment of learning needs. 5. Education. 6. Evaluation of performance.
5. Define a "learning climate" for employee development and give examples.	Experiences for growth: working as a task group, etc. Experiences for transfer of knowledge: mutual teaching, etc. Responsiveness to learner needs: mutual recognition, etc.
6. Describe the components of a contract.	A two- (or more) party agreement which presents a definition of responsibilities and benefits for all parties.

7.	Analyze and describe the dynamics of reaching a contract.	Establishing rapport, clarifying expectations, negotating settlement, etc.
8.	Develop an acceptable skill in interviewing to negotiate a contract.	
9.	Describe methods by which data may be gathered to assess an employee's needs.	Interview, formal and informal performance observations, review of written records, etc.
10.	Describe methods by which an employee's learning needs may be analyzed and determined.	Analysis of the above data, mutual problem solving, etc.
11.	Given a performance observation situation, an interview situation, and employee performance records, develop an acceptable skill in performing a diagnostic assessment of learning needs.	
12 .	Given problems of inadequate employee performance, analyze each problem and suggest ways for changing or improving performance.	Problems: Employee has difficulty breaking down activity into key steps for client. Employee grieves publically for very ill clients. Employee chronically late, frequently ill, but has not been to physician in over a year. Two staff therapists are in disagreement concerning organization of a storage unit, which both must use daily. Employee put salve on 3rd degree burns, because client asked him to.
13.	Given the problem of performing an assessment of performance, learning and growth for consideration for wage and salary increases or promotion, state: a. what information is needed b. what preparation for counseling interview is needed	Information needed: performance records, documented incidents, etc. Preparation: schedule time without interruptions, have material at hand, etc. Counseling techniques: Ask employee to tell you weaknesses and strengths and

c. techniques for counseling employee

how he can improve.
Clarify or "mirror" what he has said.
Give your impressions.
Allow him to give you feedback.
State decision.

14. Given specific employee assessment problems, analyze the problem and determine the decision and discuss the rationale for the decision.

Problem:
Clara Sicorill:
Technical skills: excellent overall, relates well with clients, is creative and makes appropriate use of media.
Staff relationships: adequate; staff occasionally resents covering for her.
Work habits: poor; poor housekeeping, poor organization of time, frequently late or absent (total of 22 days absent in one year).
Decision: 0-5% salary increase.

15. Given a specific situation, demonstrate an acceptable skill in a counseling interview with employee.

16. Compare and contrast similarities and differences between group and individual supervision.

17. Differentiate between group therapy and group supervision.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
F: 63, p. C-42
References, p. C-140

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

51. Intake: The process of initially reviewing the client's problem.

Overall Performance Objective: To determine suitability of a patient for intake evaluation and treatment.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and list resources for information concerning a given client.	Client charts, records of referral sources, etc. Conferences with health care team members, client, client's family, other individuals familiar with the client, etc.
2. Extract from these resources the data pertinent to occupational therapy.	Vital statistics, referring medical problem, socio-economic status, current and past vocational and avocational interests and skills, etc.
3. Compare the above data with available occupational therapy services in a given facility.	
4. Estimate whether or not occupational therapy intake evaluation is warranted.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

52. Client Evaluation: Methods and procedures of determining client's developmental level of function as related to occupational therapy.

Overall Performance Objective: To evaluate the referred client's developmental level of physical and psychosocial function within the context of a given occupational therapy service.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review intake data.	Charts, records, staff conferences, etc.
2. Select appropriate evaluation methods.	Developmental evaluations, level of physical capacities, cognitive-perceptual motor evaluations, social interaction skills, activities of daily living skills, work tolerance, etc.
3. Determine appropriate staff members who will implement each particular evaluation method and assign them accordingly.	
4. Implement or direct the implementation of appropriate evaluation procedures.	Put client at ease by conversing with adult or playing with child. Instruct client in evaluation procedure by explaining or demonstrating task. Administer tests, measurements, or observational analysis for physical and psychosocial function.
5. Observe, summarize, and document client performance.	Compare client behavior with norms. Record test scores or check evaluation forms. Make judgments or form evaluations and write narrative reports.

53. Treatment Planning: Formulation of overall goals and specific objectives of client therapy.

Overall Performance Objective: To formulate occupational therapy goals and objectives for the referred client.

Suggested Objectives:	Examples:
The Learner Should: 1. Review intake and evaluation information and recommendations from other staff.	
2. Formulate goals for occupational therapy from the above information with consideration of client needs, available programs, and facilities.	Analyze activity components of available activities and methods. Discuss goals with client and his family to determine appropriate media for his interests, culture, and needs. Suggest methods or activities (from those available) that will meet treatment goal(s) and are appropriate to client's needs (and desires).
3. Document goals and methods of treatment in appropriate records.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

54. Treatment Implementation and Coordination: Performing therapy functions and coordinating treatment efforts with other health care personnel.

Overall Performance Objective: 1) To choose and adapt activities to meet objectives; 2) to instruct or direct the instruction of client in activities; and 3) to coordinate client's occupational therapy program with his overall care.

Suggested Objectives:	Examples:
The Learner Should:	
1. Choose the activity(ies) that seem most appropriate to meeting treatment goal(s) from those available or possible within a given occupational therapy service.	
2. Instruct and supervise client in performance of tasks.	
3. Adjust treatment techniques to current situation.	Adapt media to meet client needs and occupational therapy objectives.
4. Coordinate treatment program with other health care workers.	Report patient's progress. Consult with other persons in order to adapt treatment techniques to client's overall program.
5. Modify original treatment plan as new, difficult, or relevant problems are recognized by the learner, client, family, or other health care workers.	Confer with patient, family, and other health care worker. Observe client behavior. Evaluate client function by administering tests and observing behavior. Compare present function with function at intake and initial evaluation. Compare function with norms. Determine problem areas of function.
6. Re-formulate treatment goals.	
7. Record problem areas of treatment and revised treatment plan.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

55. Treatment Implementation: Supervision of Staff Implementation: Overseeing treatment implementation by other occupational therapy staff personnel.

Overall Performance Objective: To supervise other staff members during treatment or training of given clients.

Suggested Objectives:	Examples:
The Learner Should:	
1. Plan client's treatment or training program.	Plan client's treatment. Review client's status and progress. Report treatment plan and client's progress. Contribute opinion about client's status to staff and make final decision on recommendations made about client's occupational therapy.
2. Give direction to those responsible for specific treatment or training.	
3. Initiate remedial action for problems incurred in therapy.	Consult with other specialists who are associated with the client and/or those who can provide input on client's problem. Present problems to conferences. Re-evaluate client's needs and status. Modify occupational therapy program to meet those needs.
4. Coordinate client's treatment or training with other workers and facilities concerned with client.	Confer with other professionals concerned with client in meetings, written notes, and phone conversations. Observe, or direct staff to observe, client in treatment facilities other than occupational therapy and incorporate relevant information into occupational therapy program.

56. Treatment Implementation: Developmental and Cognitive-Perceptual-Motor Function: Planning and implementing treatment for developmental and cognitive-perceptual-motor lag.

Overall Performance Objective: To implement treatment or training programs for clients demonstrating developmental or cognitive-perceptual-motor lag.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review intake and evaluation data.	
2. Design opportunities for learning developmental or cognitive-perceptual-motor skills.	Design progressively difficult activities typical of the continuum of normal neuromuscular development. Design progressively difficult activities typical of the continuum of normal cognitive development. Design progressively difficult activities typical of the continuum of normal emotional and social development. Design programs such as group or individual play, craft, and recreation.
3. Guide (or direct other staff in guidance of) client in performance of activities requiring increasing difficult developmental or perceptual-motor skills.	
4. Plan and arrange for continuity of treatment or training.	Suggest activities to be implemented at home. Instruct family members in program implementation. Coordinate treatment or training with other client services.

5. Plan for client's increasing skill levels.	Determine whether client's performance meets criteria of task assigned. Increase difficulty of activity within client's functioning ability.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

57. Treatment Implementation: Psychosocial Function: Planning and implementing treatment for clients exhibiting psychosocial dysfunction.

Overall Performance Objective: To plan and implement a therapeutic plan for clients demonstrating psychosocial dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review intake and evaluation data.	
2. Formulate a treatment plan. (See Treatment Planning.)	
3. Design experiences for drive sublimation and expression of feeling.	Sublimation of agression, fear, anger, self-destruction, energy drives, etc. Expression of fear, anger, affection, etc.
4. Design opportunities for development of personal competence.	Creative activities, activities of daily living, etc.
5. Arrange individual and group activities which will give client feedback about himself and his role in a social or task group.	Arrange group and social settings. Arrange individual and group task-oriented activities to encourage client in self-expression. Instruct in activities. Counsel with client about his demonstrated skills and his expressed feelings and attitudes. Design an environment in which client may become involved in planning and carrying out a task. Determine with client what skills are needed in his living environment and arrange opportunities to practice these skills while still within the institution. Schedule group meetings and help clients arrange recreational activities.

	Schedule and facilitate group volunteer activities and inform the community of client services available. Suggest alternate activities outside the treatment facility and encourage client participation in them.
6. Modify client's behavior.	Encourage and reward appropriate behavior. Ignore inappropriate behavior. Facilitate the use of peer-group pressure toward appropriate behavior. Present alternate methods of behavior.
7. Continuously gather and analyze information concerning client's behavior.	Characteristic way of responding, appearance and physical condition, verbal and non-verbal communication, ability to resolve problems, interpersonal relationships, etc.
8. Interpret client's behavior to treatment team.	
9. Continuously evaluate client's level of function.	
10. Alter treatment goals according to re-evaluation of client's needs.	
11. Implement treatment according to revised goals.	
12. Plan and arrange for continuity of treatment outside facility.	Refer client to appropriate facilities, groups or resources. Provide a day-care program.

58. Treatment Implementation: Physical Function: Planning treatment for clients exhibiting physical dysfunction.

Overall Performance Objective: To plan and implement treatment plans for clients demonstrating physical dysfunction.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review intake and evaluation data.	Review need for devices and motor activities.
2. Design therapeutic motor activities.	Arrange activities which maintain or increase strength and endurance by analyzing and determining the amount of resistance to motion, determining frequency of motion, and determining the length of time required to perform activity. Arrange activities that inhibit, stimulate or facilitate neuromuscular action. Arrange activities of daily living training. Arrange recreation activities.
3. Modify materials, equipment, work positions, and working time of activities to meet treatment goals as they are determined and/or altered to meet client's changing function.	Maintain or increase range of motion, strength, and endurance; inhibit or facilitate motion; conserve energy and simplify task; etc.
4. Negotiate with client to select specific activity(ies) to meet client's needs.	
5. Explain treatment rationale to client, his family, and other health care workers.	
6. Instruct or direct client in performance of activity selected.	

7.	Select and design devices that limit, control, or increase motion, prevent deformities,or facilitate voluntary motion.	Select existing device, or design a device to meet criteria set by client needs such as: designing and fitting splints, slings, and orthesis; selecting and adapting self-help devices; etc.
8.	Instruct client in the use of splints, slings, or self-help devices, and in the use of upper extremity orthotic devices.	
9.	Train or direct training of client in wearing of, mechanical use of, and functional use of the device.	
10.	Administer evaluation of prosthetic device and notify physician or prosthetist if device is not functioning properly.	Administer prosthetic check-out procedure.
11.	Plan and implement (or direct staff in implementation of) training in functional use of prosthetic device.	
12.	Instruct (or supervise instruction of) client in activities needed for daily functioning.	Activities for daily functioning, activities of daily living, communication skills, driver education, etc.
13.	Evaluate effectiveness of treatment.	Review client's needs. Measure client's function. Review client use of devices and analyze usefulness to client.
14.	Adjust treatment goals to meet changing client needs.	
15.	Instruct client, his family, or other health care workers to continue activity outside therapy sessions.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

59. Treatment Implementation: Prevocational Training: Planning treatment for developing work readiness skills.

Overall Performance Objective: To plan, supervise staff in implementation, and train clients in work readiness skills (such as basic work skills, work tolerance, acceptable work habits, and social skills).

Suggested Objectives:	Examples:
The Learner Should:	
1. Adapt or develop tests and evaluation procedures.	Review available data concerning desirable worker skills needed in community. Select from commercially available testing procedures. Adapt available tests. Develop work samples.
2. Determine feasibility of new activity for workshop situation.	Review client group skills and needs. Review budget and space limitations. Review community needs and resources. Make a judgment as to whether new activity is warranted.
3. Develop training experiences.	Review work opportunities in the community. Design relevant sample job situations.
4. Direct client's work readiness program.	Report results of evaluation and training. Confer with and direct staff in supervising and training clients in prevocational skills.
5. May arrange work readiness training in client's home.	Organize and coordinate work training programs. Plan for remunerative activities to be implemented in client's home.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

60. Treatment Implementation: Client's Family and Community: Using client's family and community resources in a therapeutic fashion.

Overall Performance Objective: To obtain cooperation and continuity in therapy from client's family and other health care workers in the home, institution, or community.

Suggested Objectives:	Examples:
The Learner Should:	
1. Inform and consult with family and other health care workers.	Report orally and in writing. Discuss client's abilities (in relation to his life situation). Describe evaluation procedures and interpret results. Invite family and other health care workers to observe or participate in evaluation and treatment sessions. Demonstrate and discuss client capabilities, as well as his disabilities.
2. Instruct in implementation of treatment and use of equipment.	Recommend home activities. Demonstrate and explain methods and application of exercises, use of equipment, beneficial activities, helpful attitudes and behavioral responses that are useful in working with client, etc.

61. Treatment Records: Documentation of services received by client, and his responses to therapy.

Overall Performance Objective: To document client's problem, goals and objectives of therapy, services received by client, client responses to therapy, and recommendations or referrals.

Suggested Objectives:	Examples:
The Learner Should:	
1. Report intake data orally or in writing.	
2. Report results of evaluation procedure.	
3. Report treatment or training plan.	
4. Report treatment implementation results by reporting progress or lack of progress and report future recommendations.	
5. Distribute information verbally or in writing through appropriate means.	
6. Receive information from referring physician and through client health care team conference.	

62. Termination and Follow-Up: Delineating occupational discharge plans, treatment recommendations, and plans for post-institutional care.

Overall Performance Objective: To formulate client's occupational therapy discharge plans.

Suggested Objectives:	Examples:
The Learner Should:	
1. Recommend termination of treatment.	Review effect of treatment. Confer with treatment team and client. Note recommendation in client's record.
2. Determine client's equipment needs.	Review client's function. Determine description and measurement of equipment.
3. Summarize client's treatment program and future recommendations.	Write summary of treatment program, client's progress, and future treatment recommendations.
4. Refer client to appropriate agency or individual.	Confer with client and agencies. Follow established referral procedures.
5. Instruct client, his family, or other health care workers.	Discuss activities to be performed. Demonstrate and explain activities. Make assignments as needed.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

63. Program Coordination: Arranging occupational therapy services in relation to other health services in a given facility.

Overall Performance Objective: To coordinate occupational therapy services with other associated programs in a given facility.

Suggested Objectives:	Examples:
The Learner Should:	
1. Assist in program and policy formulation.	Exchange information with others during committee and staff meetings. Write notes or reports. Make suggestions and participate in problem solving process. Share in evaluation process of facility. Ascertain what other programs are offering by determining overlap and gaps in total services that meet client's needs.
2. Develop and suggest procedures related to occupational therapy which might be implemented by other staff.	Determine what procedures can be done by other staff members. Instruct other staff in procedure implementation through demonstration and explanation.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

64. Program Management: Direction of an occupational therapy service.

Overall Performance Objective: To organize and direct given occupational therapy services.

Suggested Objectives:	Examples:
The Learner Should: 1. Implement occupational therapy service policy(ies) in a given situation.	
2. Direct a given occupational therapy program.	Supervise and coordinate staff and their assignments. Supervise student and volunteer activities. Coordinate all teaching activities in occupational therapy services. Make work assignments for staff members by reviewing tasks to be accomplished, assigning tasks appropriate to staff's skills and abilities, and changing assignments when necessary.
3. Exchange information with occupational therapy staff.	Convey policy decisions and procedural plans. Discuss problems and suggestions for change. Present new findings and procedures that may be implemented.
4. Review inventory needs.	Survey needed inventory to meet services rendered. Direct staff in inventory maintenance by checking equipment for repair, controlling material use, noting needed supplies and equipment, etc.
5. Evaluate the need for purchase and control expenditures.	Determine necessity for purchase or repair in terms of service requirements and availability of appropriate funds.

	Collect information on equipment, supplies,and services by conferring with salesmen, viewing displays, and reviewing catalogs. Review budgetary limitations imposed on purchase.
6. Plan budget statement and plan of service for assigned program.	Review previous budget statements. Review projected departmental costs based on projected workload, supplies and equipment needed, and type of personnel required. Plan for program change or new facilities.
7. Submit proposed budget and service plan for approval.	Inform proper sources within the facility of staffing needs by reporting workloads and submitting plans for service.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

65. Program Reporting: Compiling and presenting data concerning occupational therapy programs and client services.

Overall Performance Objective: To write reports of program activities and client services.

Suggested Objectives:	Examples:
The Learner Should:	
1. Compile data regarding activities and services.	
2. Compose reports and letters in order to ask and answer questions, request referrals, refer clients, and convey information	
3. Report to other persons or facilities concerning occupational therapy program.	Report progress and status of program. Summarize client's progress and status. Report statistical and financial data.
4. Review reports composed by others.	Evaluate content of report. Suggest changes.
5. Compose reports to comply with institution or project grant policies (if applicable).	Report progress. Justify budget. Request funding.

66. Self Education: Improvement of personal knowledge and skill base.

Overall Performance Objective: To maintain and improve knowledge of current concepts and practices related to work.

Suggested Objectives:	Examples:
The Learner Should: 1. Receive instruction by attending and participating in conferences, workshops, seminars, training sessions, etc.	
2. Review related academic and professional literature.	
3. Participate in individual instructional or counseling sessions with occupational therapy staff members, other health professionals, and other experts.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

67. In-Service Education: Participation in planning and implementing in-service education conferences, workshops, and other seminars.

Overall Performance Objective: To participate in providing in-service education for staff and students.

Suggested Objectives:	Examples:
The Learner Should:	
1. Plan a given portion of an in-service education program.	Analyze need for training. Determine treatment problems and client needs. Determine skills and abilities of staff and conclude which staff should be trained. Formulate educational objectives. Determine teaching methods by obtaining information about subject matter and determining time and requirements for training. Obtain literature and audiovisual aids.
2. Implement an assigned portion of an educational program.	Present lecture. Provide simulation or role-playing experiences. Demonstrate treatment techniques. Discuss occupational therapy objectives, functions, and techniques.
3. Evaluate an assigned portion of a given program.	Note any changes in skills of staff. Confer with medical and administrative directors about their perceptions.
4. Analyze and distribute informative data to appropriate others.	Publicize meetings, workshops, and classes. Distribute new texts and articles.
5. Instruct a given group of occupational therapy students in principles and practices of occupational therapy.	Determine activities and teaching methods. Present information by methods such as lecture, discussion, and demonstration of techniques.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULES

68. Personnel Management: Administration of worker activities and supervision of occupational therapy personnel.

Overall Performance Objective: To coordinate the efforts of a given occupational therapy staff to meet the needs of a specific client population and of a given facility.

Suggested Objectives:	Examples:
The Learner Should:	
1. Recruit new workers and volunteers for a given position or task.	Notify personnel of openings by writing letters and initiating phone calls to publicize availability of position.
2. Select new worker(s) and volunteers.	Interview applicants and evaluate data about them, such as job experience, education and training, and physical and personal qualifications. Review applications and references.
3. Hire worker(s) and volunteers.	Participate in setting wages. Use hiring methods developed by facility.
4. Orient new employee or volunteer.	Familiarize worker with client population. Describe existing treatment methods or goals, assign work, supervise worker or volunteer closely at beginning and gradually increasing work load.
5. Supervise specified occupational therapy employees by developing work assignments and coordinating and assigning duties, by arranging counseling seesions, and by resolving work related problems.	Review available staff hours, skills, and abilities; client needs; total work load; and time records. Approve work hours, vacation, sick time, or overtime. Request reports of service time for employees who work outside facility.

6.	Implement specified safety regulations.	Require a written accident or incident report. Set up safety procedures and theft prevention methods. Enforce these procedures.
7.	Coordinate and supervise activity of assigned volunteer workers.	Orient workers to occupational therapy objectives and methods. Assign tasks. Oversee performance. Train for needed skills. Provide encouragement and feedback.
8.	Plan on-the-job training procedures.	Determine what techniques are to be presented. Present new information. Instruct or direct instruction of new or alternate training or treatment techniques, etc.
9.	Evaluate assigned occupational therapy employee performance.	Determine criteria for performance evaluation. Observe work performance. Confer with other staff. Compare performance with criteria set for evaluation. Complete evaluation forms. Discuss evaluation with employee (obtain individual's signature). Review personnel records. Recommend action, such as promotion, discipline, dismissal or wage change consideration.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

69. Clinical Education: Development and implementation of programs of clinical practice for assigned students.

Overall Performance Objective: To develop and implement clinical learning programs for assigned students.

Suggested Objectives:	Examples:
The Learner Should:	
1. Plan for an assigned clinical practice program.	Determine level of skill and knowledge of students entering a given clinic. Set educational objectives. Confer with school, faculty, and students. Plan educational experiences and assignments.
2. Instruct students in an orientation program.	Orient students to facility on a tour. Explain establishment and occupational therapy policies, procedures, goals, etc.
3. Inform students of assignments.	Work area and case load, written and special assignments which are required, lectures and demonstrations to be attended, etc.
4. Supervise students in gradually decreasing amounts.	Observe and analyze student performance. Discuss application of theory to technical skills, client-student relationships, group dynamics, etc.
5. Instruct student in needed knowledges and skills.	Explain and demonstrate use of materials, machines, and devices; techniques of evaluation and testing; recording and reporting; requisitioning; etc.

6. Counsel student and give advice about observed skills, ongoing learning and growth, etc.	
7. Evaluate student performance.	Comment on student's performance in client evaluation, client treatment, reports, and other assignments. Confer with other staff. Summarize student's progress. Send report of student's performance to affiliating school or university.
8. Coordinate program with affiliating school or university.	Exchange information about mutual objectives. Coordinate student's schedule and assignments. Participate in clinical faculty meetings.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

70. Volunteer Training: Preparing volunteers to work in an occupational therapy department.

Overall Performance Objective: To provide learning experiences for volunteers assigned to occupational therapy.

Suggested Objectives:	Examples:
The Learner Should: 1. Develop instructional programs.	Develop orientation programs such as tours, discussions, and demonstrations. Write training manuals. Prepare audiovisual aids.
2. Instruct assigned volunteers by: a. orienting them to facility and department. b. orienting them to specific client needs. c. explaining and demonstrating given procedures.	Conduct tour while explaining, discussing, and demonstrating ongoing activities. Explain disabilities and needs using media and techniques, such as training manual, audiovisual aids, demonstrations, etc. Inform volunteers of specific aspects of occupational therapy program. Discuss and demonstrate techniques.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

71. Continuing Education: Participating in or planning programs designed to maintain and improve skills and knowledge of health care workers.

Overall Performance Objective: To organize and/or participate in planning programs to train health care related workers.

Suggested Objectives:	Examples:
The Learner Should:	
1. Arrange an assigned portion of a given workshop or conferences.	Consider needs and requests of professionals and determine topics to be covered. Correspond with possible participants and planners. Set dates. Secure financial support. Secure meeting rooms, housing transportation, printing of materials, etc.
2. Instruct in assigned techniques or skills.	Present information through lecture, discussion, and simulation. Use audiovisual aids. Demonstrate or discuss methods.

72. Public Information: Relating information about occupational therapy goals and values to public agencies, interested lay groups, and other related health professionals.

Overall Performance Objective: To inform individuals and groups about occupational therapy principles and values.

Suggested Objectives:	Examples:
The Learner Should:	
1. Conduct assigned tours of facility and occupational therapy service and explain ongoing activities.	
2. Present talks and provide information to other services or agencies.	Confer and participate on committees.
3. Demonstrate occupational therapy techniques.	
4. Participate in community activities.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

73. Research: Analysis of new or existing occupational theories and practices to determine their effectiveness.

Overall Performance Objective: To participate in designing and implementing research projects.

Suggested Objectives:	Examples:
The Learner Should:	
1. Develop or assist in developing a research hypothesis.	Confer with specialists or other interested individuals. Determine method of investigation. Apply for financial assistance, if appropriate. Compose project proposal.
2. Review related literature and research reports.	
3. Compile and record raw data.	Compile and interpret data in relation to proposed project.
4. Analyze results of data.	Compile results of study. Compute statistical analyses when indicated.
5. Write results of research project.	
6. Submit report of research project to appropriate sources for publication or presentation of project when appropriate.	

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

74. Consultation for Preventive Health Care: Consultation with community agencies for preventive health.

Overall Performance Objective: To confer with representatives from community agencies or committees in order to participate in developing preventive health programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Evaluate an assigned aspect of community needs and trends in health care services.	Collect and compile demographic and health service data. Confer with various health and community agencies and/or personnel.
2. Participate and assist in program development.	Provide information about programs for non-institutionalized populations. Provide opinions and data dealing with community needs, agency policies, procedures, and programs. Make recommendations about policies, procedures, and programs which deal with community needs.
3. Assist in the development of evaluation instruments to evaluate both community needs or program goals and objectives.	Questionnaires, opinion surveys, etc.

75. Consultation for General Activities Program: Developing recreational and therapeutic activities programs for implementation by a consultee agency.

Overall Performance Objective: To develop general activities programs for implementation by consultee agency staff.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review agency's needs and limitations.	Analyze needs of clients. Review budget limitations. Review skills and abilities of present staff.
2. Develop program recommendations.	Design a workable activity program. Make recommendations recarding assignments of staff. Recommend specific consultant services required to implement the program.
3. Submit proposed program to agency.	Illustrate and explain procedures to be used.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

76. Consultee Agency Staff Training: Instruction of consultee agency staff to implement activity program.

Overall Performance Objective: To instruct consultee agency staff in all aspects of activity program.

Suggested Objectives:	Examples:
The Learner Should:	
1. Instruct facility staff to perform assigned duties.	Conduct classes. Demonstrate activity methods. Supervise staff practice.
2. Evaluate level of staff comprehension of program objectives.	Observe level of work competency. Substantiate effectiveness of program procedures by interviewing personnel, reviewing reports of client activity, etc.
3. Evaluate training program.	Confer with facility management and officers. Determine success of training program.
4. Terminate direct training.	Determine when staff is competent to function without direct supervision.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

77. Consultation with Community Agencies on a Continuing Basis: Continuous advisory and instructional assistance to a consultee agency for maintaining and improving occupational therapy services.

Overall Performance Objective: To consult with a given facility or agency on a continuing basis to assist in implementing occupational therapy programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Advise agency staff.	Identify client problems. Answer questions and suggest alternate treatment methods and techniques. Evaluate programs with agency staff periodically. Maintain communications with staff.
2. Instruct staff in principles of occupational therapy.	Demonstrate occupational therapy treatment techniques. Conduct discussions and simulation sessions.
3. Coordinate total occupational therapy program.	Evaluate level of client function and supervise services for specifically referred clients. Suggest and review treatment plans. Review client progress and treatment implementation with staff.

PREPARATION FOR OCCUPATIONAL THERAPIST

CLINICAL APPLICATION MODULE

78. Consultation with Community Agencies: Data Collection for Program Planning: Applications of survey methods to determine consultee agency needs.

Overall Performance Objective: To determine the extent of need for consultant services for occupational therapy within a given community.

Suggested Objectives:	Examples:
The Learner Should:	
1. Collect data, or coordinate data collection and review data surveys concerning current and future trends in health care services within a given community.	Confer with health professionals and personnel from community organizations. Send surveys or questionnaires to appropriate sources.
2. Determine if negotiations with specific agencies are warranted.	Review survey information. Determine health care needs that can be met by the occupational therapist.

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

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Curriculum Guide for Preparation of:
OCCUPATIONAL THERAPY CONSULTANT

INTRODUCTION

THE OCCUPATIONAL THERAPY CONSULTANT FUNCTION

The data base for development of this curriculum guide is the job description of which a summary is presented below. Complete job descriptions are presented in the Job Descriptions Manual developed from this project. Comprehensive descriptions of the procedures for development of the job descriptions and the curriculum guides are presented in a Procedure Manual developed from this project.

This curriculum guide has been developed to prepare an individual to perform the following activities:

Occupational Therapy Consultant (Program Development)

General Definition: *Plans and formulates occupational therapy programs and conducts research projects in order to implement habilitation or rehabilitation programs and expand total knowledge of occupational therapy principles:*

Formulates and develops research hypothesis by conferring with specialists, discussing research proposal possibilities, and determining research design, methods, and means of investigation and evaluation. Composes research project proposal. Reviews related research data. Implements research activities with other staff activities. Documents research problem and results by compiling and writing summary or results of study, including supportive data and evaluation of methodology.

Plans and develops occupational therapy program or project proposals by compiling, evaluating, and analyzing data about ongoing program or proposed program, and composing plan to implement and coordinate program or project.

Formulates and coordinates occupational therapy policies and procedures, and determines organizational structure by identifying program needs, applying for financial support, and planning for required facilities, personnel, and materials.

Formulates and coordinates continuing education programs by identifying program needs, planning program, applying for financial support, negotiating for required facilities and personnel, and supervising program implementation.

Performs related duties: May submit reports of research methodology and results for publication or conferences by making application and writing article or paper. May promote services offered by occupational therapy consultant by writing letters and brochures or arranging conferences with consultee. Participates in continuing self-education by attending conferences, seminars, and training sessions, by reading and studying materials related to work.

Qualifications for Entry into the Curriculum

In order to delineate the attitudes, aptitudes, and educational level required for entry into each curriculum level, selection specifications were developed. (Detailed description of their development is included in Appendix D of this manual.) Unlike the other guides in this manual the consultant level preparation assumes prior education in occupational therapy. In addition to the selection specficiations below, the individual should have completed the equivalent of the modules outlined in the curriculum guide for the occupational therapist.

The selection specifications for entry into the Occupational Therapy Consultant Curriculum are:

1. Have level 5 GED in language, mathematics, and reasoning development. Specifically, the level 5 General Educational Development Scale includes the items listed in the chart on page 455.
2. Be in the top 20% of the population in intelligence.
3. Be in the top 25% of the population in verbal ability.
4. Be in the top 50% of the population in numerical ability.
5. Desire activities involving business contact with people.
6. Desire activities involving work with people for their presumed good and prestige.
7. Desire activities involving scientific, technical, and abstract work.
8. Be capable of adjusting to frequent change.
9. Be capable to adjusting to dealing with people beyond giving and receiving instruction.
10. Be able to influence the opinions, attitudes, and judgments of others.
11. Be able to evaluate information against sensory or judgmental criteria.

GENERAL EDUCATIONAL DEVELOPMENT LEVEL V (COLLEGE 1–2)*

Language Development			Reasoning Development	Mathematical Development	Mathematics Curriculum	
Read or write speeches, book and play reviews, scientific and technical materials, abstracts, financial reports and legal documents. Be conversant in the theory, principles and methods of effective and persuasive speaking, including voice, diction and phonetics, in discussion and debate.	Reading:	Literature, book and play reviews, scientific and technical journals, abstracts, financial reports, legal, historical and medical documents, periodicals.	Apply principles of logical or scientific thinking to define problems, collect data, establish facts and draw valid conclusions. Interpret an extensive variety of technical instructions, in books, manuals or mathematical or diagrammatic form. Deal with several abstract or concrete variables.	Apply knowledge of established statistical and mathematical techniques in the analysis and evaluation of data.	College Algebra:	Exponents and logarithms, linear equations, quadratic equations, math induction and binomial theorem.
	Composition:	Analysis and practice of expository techniques with emphasis on organization of material and development of unity.			General Math:	General introduction to the concepts of algebra, plane geometry, trigonometry and calculus.
	Logic:	Study of the principles of inductive and deductive reasoning, such as testing evidence, validity of generalizations, and cause and effect relationships to detect fallacies in arguments and to avoid these errors in own writing.			Calculus:	Elementary concepts of analytic geometry; differentiation and integration of algebraic functions and transcendental functions with application. Vector concepts, improper integrals, polar coordination and infinite series. Integration and partial differentiations, solid geometry, differential equations.
	Rhetoric:	Study of the collection, arrangement, and expression of subject matter to persuade or instill an acceptance of ideas in the mind of the reader.			Introduction to Math Logic:	Development of propositional and predical calculi, basic sematic concepts and elementry intuitive set theory.
	Creative Writing:	Develop a free and independent skill in writing, based on own knowledge and experience.			Introduction to Matrix Theory:	Elementary theory of finite vector spaces, determinates, equivalence, matrices with polynomial elements, similarity of matrices.
	Narrative Writing:	Develop a sequential and descriptive style of writing.			Statistics:	Graphic presentations illustrating averages, dispersions, quartiles and percentiles, frequency distribution, reliability and validity of tests. Applied to Psychology and Education, analysis of variances, correlation techniques, chi-square and sampling techniques. Applied to business and economics, introduction to the principles and use of linear programming, game theory and queuing theory.
	Playwriting:	Study and application of theory of dramatic writing.			Math of Finance:	Interest and discount, annuities, valuation of stock and bonds, sinking funds, amortization valuation of depletable assets.
	Speaking:	Effective Speaking: Study in the selection, organization of material and delivery of speech. Development of voice control, poise and confidence. Persuasive Speaking: Emphasis on composition of speech and principles of persuasion. Voice and Diction: Study of standards of speech. Record speech and study recording to develop voice control volume, pitch and rate. Phonetics: Study and classification of sounds of speech. Discussion and Debate: Study of types and principles of public and group discussions. Methods in leading discussion; practice in argumentation and debate.			Factor Analysis:	Matrix theory as applied to factor analysis, introduction to concepts of factor analysis and their utility in phases of research.
					Quality control Techniques:	Application of probability and distribution theory to industrial control problems, use of quality charts, acceptance sampling plans.
					Introduction to Math Probability:	Probability distributions, Bayes' theorem and postulate; Bernoulli's theorem and its experimental verification, math expectation, laws of large numbers.

*From: Guide for Relating General Educational Development to Educational Curriculum: U. S. Department of Labor, Manpower Administration, 1971.

12. Desire indoor employment.
13. Desire a job with very little physical activity.
14. Be able to devote 1 to 2 years to training.
15. Be an occupational therapist.

The job description lists the performances expected of the learner at the completion of the curriculum; the selection specifications are the requirements for entry into the curriculum; the curriculum guide suggests learning experiences which enable an individual who meets the selection specifications to obtain competencies required for job performance.

Some suggestions for structuring the Occupational Therapy Consultant Curriculum are provided in the following paragraphs.

DEVELOPMENT OF CURRICULUM FOR THE OCCUPATIONAL THERAPY CONSULTANT

The modules were designed as "building blocks" for learning knowledges and skills. Each module is probably related to all of the others in some fashion; however, these module "blocks" may be put together in many varied ways.

Curriculum development from this guide may be approached as four interrelated processes:

1. Clustering modules to develop tentative course work.
2. Sequencing to include placement of course work in a learning continuum.
3. Assembly of course work to include instructional objectives, instructional strategies, media, evaluation methods and time span of course.
4. Determination and placement of affective learning.

1. Module Clusters. Decisions must be made as to how modules will be grouped; will each module remain as is, be combined with others, or be divided to form a course of study? Several approaches are possible.

   The chart on page 458 indicates a number of ways in which modules may be clustered. It may be read in the same manner as a mileage chart on a road map. Each module is listed across both the vertical and the horizontal axes. Each of the cells on the chart contains a letter which indicates a relationship between a module on the vertical axis and a module on the horizontal axis. Suggested relationships between modules are keyed as follows:

   I = *the two modules may be learned independently of each other.*
   R = *the modules are related to each other. There is a potential for sequencing the two modules along a linear time continuum.*

C = Module content provides close intrinsic relationships and may potentially be clustered.
S = The modules may be learned simultaneously or concurrently in time. Content areas are extrinsically related, and each may enhance the learning of the other.
/ = May be read as "or" or "and". In some cases, when 2 modules are related (R) to each other, aspects of each may be clustered (C) or learned simultaneously (S).

Assume that one wanted to determine the relationship(s) between two modules - for example, module number 1 "The Consultant Function' and module number 13 "Group Dynamics". Locate number 1 on the vertical axis and number 13 on the horizontal axis. At the point where the lines for number 1 and 13 cross may be found the code R/S which indicates that the two are related to each other, and that is might be beneficial to learn them simultaneously (but not clustered into the same academic course).

Another example might be the group of modules concerning "the health care system" (numbers 2, 3, 4, 5, and 6). If one looks at where the lines for all of these modules cross, one sees six cells which contain indications for clustering. Two or more of the modules indicated might be clustered - for example, intrinsic content relationships are evident in three modules: "The Health Care System", "Management in Health Care", and "The Consultant Function". "Communications in Health Care" might be extrinsically related and learned simultaneously with "Health Care Systems" and "Health Care Issues".

2. Sequencing of course work. Decisions concerning placement of course work in a learning continuum are interdependent with decisions concerning course work content. Consideration must be given to prior, concurrent, and subsequent learning for each course.

For example, should the module for "Survey Research" be learned prior to, concurrent with, or after the modules for "Medical Journalism" and "Instructional Planning"? These decisions are dependent upon the course content vis-a-vis the learner's knowledge and aptitudes, and within the context of the institutional setting.

Again, the chart on page 458 may give some assistance.

Modules are listed on each axis in a linear sequence. They are grouped according to the content area and in increasing complexity of

SUGGESTIONS FOR CLUSTERING AND SEQUENCING
THE OCCUPATIONAL THERAPY CONSULTANT MODULES

	Clinical Application					Information Application								Basic Information									
	23. Research in O.T.	22. Cont. Ed. Prog.	21. Applied Prog. Dev.	20. Prog. Plng. for Cons.	19. Self-Education	18. Applied Research	17. Program Plng.	16. Supervisory Plng.	15. Instruction Plng.	14. Negotiation Skills	13. Group Dynamics	12. Medical Journalism	11. Group Communication	10. Experimental Res.	9. Non-Experimental Res.	8. Intro. to Research	7. Curriculum Devel.	6. Health Care Issues	5. Health Care Facility	4. Communication	3. Mgmnt. in Health Care	2. Health Care Systems	1. Consultant Function
Basic Information																							
1. Consultant Function	R	R	R	R/C	C	R	R/C	R/C	R	R/S	R/S	R	R	I	I	I	R	R	R/C	R/C	R/C	R/C	
2. Health Care Systems	R	R	R	R	C	R	R	R	R	R	I	R	R	I	I	R	I	R_C	R	R_C	R_C		
3. Mgmnt. in Health Care	R	R	R	R	C	R	R/C	R/C	I	R/C	R	I	R	I	I	I	I	R	R	R/S			
4. Communication	R	I	R	R	C	R	R	R	I	I	R	R/C	R/C	I	I	I	I	R	R/S				
5. Health Care Facility	I	R	R	R	C	I	R/C	I	I	I	I	I	I	I	I	I	I	R/S					
6. Health Care Issues	R	C	R	R	C	R	R	I	I	R	R	R/C	R/C	I	I	I	I						
7. Curriculum Devel.	I	R	R	R	C	I	R	R	C	I	R	I	R	I	R	I							
8. Intro. to Research	R/C	R	R	R	C	R/C	R	I	R	I	I	R/S	I	R/C	R/C								
9. Non-Experimental Res.	R/C	R	R	R	C	R/C	R	I	R	I	I	R/S	I	C									
10. Experimental Res.	R/C	R	R	R	C	R/C	I	I	R	I	I	R/S	I										
Information Application																							
11. Group Communication	I	R	R	R	C	I	R	R	R	I	R	R											
12. Medical Journalism	R	R	R	R	C	R/S	R	I	I	I	I												
13. Group Dynamics	I	R	R	R	C	I	R	R	R	R/C													
14. Negotiation Skills	I	R	R	R	C	I	R	R/C	R														
15. Instruction Plng.	R	R_C	R	R	C	I	R/C	R/S															
16. Supervisory Plng.	R	R	R	R	C	R	R/S																
17. Program Plng.	R/C	R/C	R/C	R/C	C	R/C																	
18. Applied Research	C	R/C	R/C	R/C	C																		
Clinical Application																							
19. Self-Education	C	C	C	C																			
20. Prog. Plng. for Cons.	R	R/C	R/C																				
21. Applied Prog. Dev.	R/C	R/C																					
22. Cont. Ed. Prog.	R																						
23. Research in O.T.																							

LEGEND

I = independent of
R = related to
C = clustered with
S = simultaneous with
/ = or

learning. However, learning is rarely linear. For example, module number 13 "Medical Journalism" may not require number 7 "Curriculum Development" as a prerequisite, but it may require number 8 "Introduction to Research Methodology". All three of those modules may be prerequisite to number 22 "Continuing Education Program Planning".

The use of the chart to determine suggested, related, and simultaneous learnings should provide direction for designing alternative course sequences for a variety of learners in several different settings. One potential sequencing pattern for the modules contained in this guide is presented on page 460.

3. Assembly of course work. As a course is assembled, the following processes should take place:
    a. Clarify and specify instructional objectives.
    b. Estimate the amount of time (number of hours, number of credits, etc.) the course should require.
    c. Determine teaching strategies and methods.
    d. Determine teaching media, bibliographical resources, or texts.
    e. Determine evaluation instrument (classroom or laboratory test) to be used.

Example: Assume that the following three modules are to be combined into a course of instruction:

Basic Information Module: Curriculum Development: Theories and methods related to: the development of curriculum goals, instructional objectives, media, methods, strategies and evaluation strategy and procedures.

Information Application Module: Instructional Planning, Strategies and Media: The application of curriculum and instructional theories and practices to occupational therapy education.

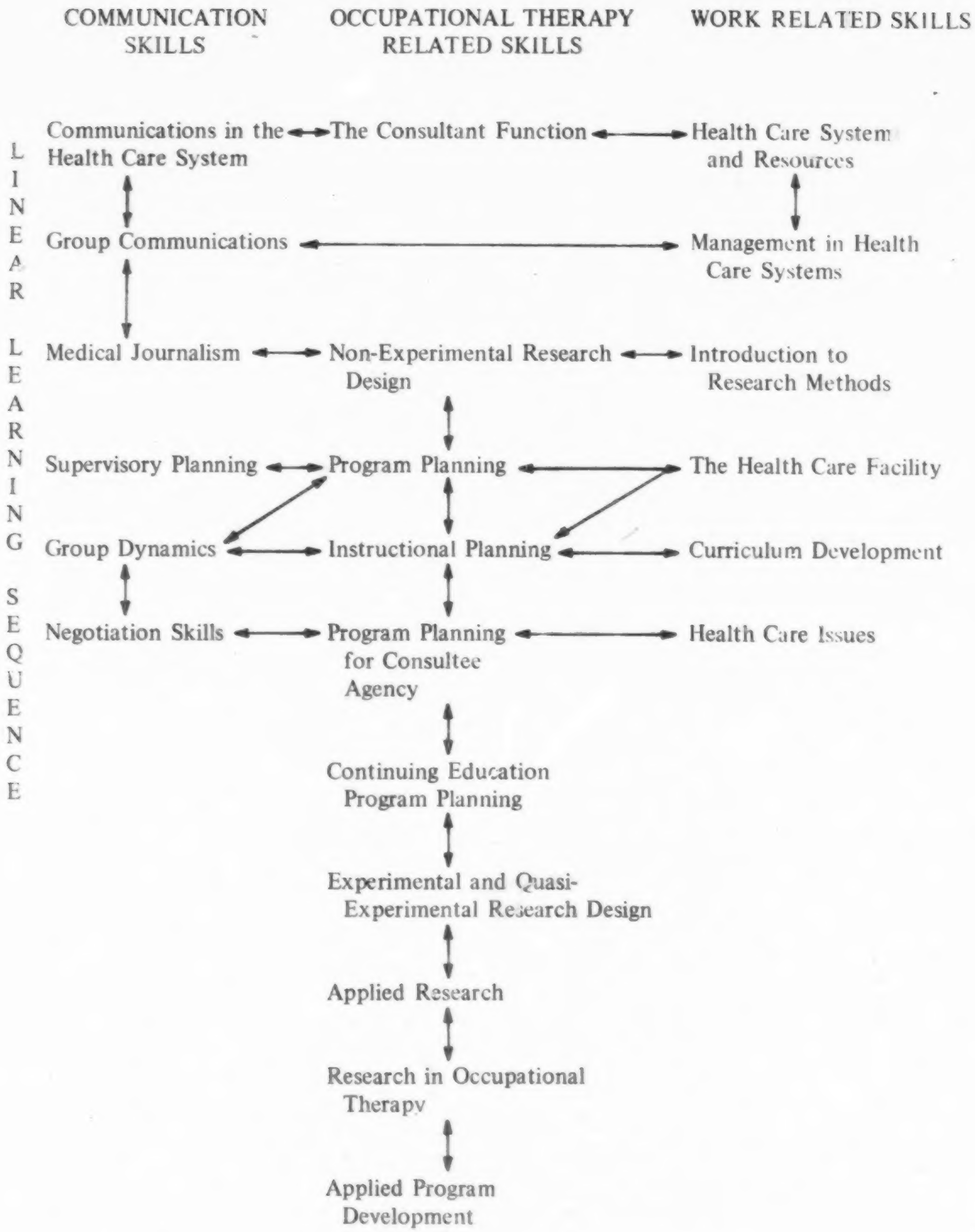
Clinical Application Module: Continuing Education: Formulation and implementation of educational programs for allied health workers.

a. Clarify and Specify Instructional Objectives:
Following are the overall performance objectives:

Curriculum Development: 1) To identify and describe theories of educational curriculum development, 2) to identify and discuss methods and procedural steps for developing curriculum content, and 3) to identify and describe the essential components of curriculum.

Suggested Learning Sequence

Preparation for Occupational Therapy Consultant


COMMUNICATION SKILLS
OCCUPATIONAL THERAPY RELATED SKILLS
WORK RELATED SKILLS
LINEAR LEARNING SEQUENCE
Communications in the Health Care System
The Consultant Function
Health Care System and Resources
Group Communications
Management in Health Care Systems
Medical Journalism
Non-Experimental Research Design
Introduction to Research Methods
Supervisory Planning
Program Planning
The Health Care Facility
Group Dynamics
Instructional Planning
Curriculum Development
Negotiation Skills
Program Planning for Consultee Agency
Health Care Issues
Continuing Education Program Planning
Experimental and Quasi-Experimental Research Design
Applied Research
Research in Occupational Therapy
Applied Program Development

Instructional Planning: 1) To identify and describe the instructional needs of medical and allied health personnel, 2) to identify and describe effective teaching strategies and methods in continuing education for health care personnel, 3) to identify and list resources for media, and 4) to demonstrate an acceptable skill in selecting a content area, analyzing and determining educational needs for a given group for that content area, formulating behavioral objectives, planning instructional strategies and methods, selecting and obtaining media, implementing an instructional unit, evaluating the quality of instruction and the quality and quantity of learning.

Continuing Education Program Planning: 1) To formulate, coordinate, and implement educational programs for specific groups of health care workers.

In reviewing the above overall objectives, some may be combined, for example number 4 in "Instructional Planning" above and number 1 in "Continuing Education Program Planning."

If it is determined that all of the above objectives are an essential part of the course, then each objective should be clarified to specify:

1) who should do the activity (audience),
2) what should be done (behavior),
3) under what circumstances (conditions), and
4) how well or completely (degree)?

For example, for the instruction module above, overall objective number 1 could be restated to read:

> Given the task of preparing a course or unit for a group of occupational therapy technicians who are participating in a continuing education program (conditions), the learner (audience) will construct and implement a survey, pretest, or other instrument to determine the group's instructional needs (behavior), and will defend the validity of the instrument and his findings by reporting survey methods used and by obtaining expert approval from two qualified individuals concerning appropriate use of instrument and data (degree).

Determination of precise behavioral objectives is a difficult task. Some assistance may be found by selecting behaviors from the suggested objectives in each module.

Some educators feel that precise behavioral objectives are limiting to the learner. At any rate, both teacher and learner should know what the learning goals are in any given course.

Clarification of objectives will also point out the need for related learnings. In the above example, the learner will need either prior or simultaneous learning in survey research methodology.

b. Estimate the amount of time the course will require. At this point some estimation of how much time is involved for the "average" learner must be made in order to make related decisions concerning scheduling and sequencing.

c. Determine teaching strategies and methods. Assistance in this task may be found in Appendix A of this manual. For the above example, a student group activity, using discussion and/or task groups to determine instruments and evaluation design is suggested. Student independent strategy might be used for student reading or literature search.

d. Determine teaching media and resources. Assistance in this task may be found in Appendix C of this manual. The listing is by no means complete. For the example above, the following might be useful:

    Mager, R.F., & Pipe, P.: Analyzing Performance Problems or "You Really Oughta Wanna".

    Hospital Research and Educational Trust: Training and Continuing Education. Chicago, 1970.

e. Determine evaluation instrument. Assistance in this task may be found in Appendix B of this manual. In the above example, the evaluation of learning competence is already stated. An essay or description of the learner's evaluation of his findings with expert approval provide the instructor with evidence of competency.

No discussion of instructional objectives would be complete without consideration of affective objectives or applications. Integration of feeling with knowledge and skill is essential to satisfactory performance.

A CLASSIFICATION OF VERBS RELATED TO A COGNITIVE TAXONOMY

Knowledge - emphasis on recall, specific or universals.

VERBS:

- choose
- define
- identify
- review
- survey
- read
- indicate
- answer question
- label
- list
- locate
- match
- select
- copy
- complete a word, phrase, or statement
- record
- confer (to gain information)
- review (to obtain facts)

Comprehension - emphasis on grasp of meaning, intent, relationships, in oral, written, graphic, non-verbal communication.

VERBS:

- classify
- describe
- estimate
- expand
- explain
- express
- interpret
- measure
- recognize
- suggest
- summarize
- trace
- convert
- compare the importance of
- put in order
- compute
- review to explain

Application - emphasis on applying appropriate principles or generalizations.

VERBS:

- arrange
- apply
- calculate
- construct
- make
- draw
- demonstrate
- differentiate
- discuss
- implement
- coordinate (activities)
- use information, tools
- collect information
- keep records
- perform activity
- plan activity
- prepare
- present
- solve
- compile data
- schedule
- administer test

Analysis - emphasis on breakdown into constitutent parts and of the way they are organized.

VERBS:

- analyze
- debate
- determine
- differentiate
- review to analyze
- form generalizations
- deduce
- draw conclusions
- make inferences
- organize
- interpret relationships

Synthesis - emphasis is on putting elements or parts to form a whole.

VERBS:

- combine and organize
- design
- develop
- coordinate (program design)
- produce
- write (original)
- plan program

Evaluation - emphasis is on values, making qualitative or quantitative judgments with criteria from internal or external sources and with standards.

VERBS:

- make a decision
- evaluate
- compare (and contrast)

4. Affective Application to Learning Occupational Therapy Consultant Tasks. Affective objectives are related to task performance of the occupational therapy consultant in a clinical application setting, but it is assumed that the listed affects will be learned throughout the learner's educational program. As the educator plans curriculum, he should attempt to integrate affective learning with cognitive and psychomotor learning. Therefore, although the following objectives must also be included during the learning of basic information and information application modules, their placement and composition depend upon learning sequence, module clustering and the value system of each individual learner.

The affective applications are structured as follows:

1. *Title and definition of affective application Both of these items are extrapolated from:* Krathwohl, David R.; Bloom, Benjamin S.; and Masia, Bertram B. Taxonomy of Educational Objectives, Handbook II: The Affective Domain, New York: David McKay Company, 1964.
2. *Overall Performance Objective. This item is an explanation of how the affect is related to occupational therapy task performance.*
3. *Suggested Questions Concerning Learner Performance: These items are stated as questions to suggest means by which the teacher and the learner may infer satisfactory task performance. They are not definitive. Many alternative questions are possible.*

Following are a list of three affective performance objectives extrapolated from a questionnaire sent to occupational therapy educators and practitioners.

Affective Applications for the Occupational Therapy Consultant:

a. Affective Application: Organization of a Value System: Development of a value system "to bring together a complex of values, possibly disparate values, and to bring these into an ordered relationship with one another".

Overall Performance Objective: The learner will organize a value system concerning personal responsibilities and therapeutic principles to be demonstrated in formulating, integrating, and coordinating occupational therapy policies, procedures, and programs and in making required organizational changes.

Suggested questions concerning learner performance:

1. How does the learner identify personal feelings that have a direct bearing on his personal

responsibilities in developing policies, procedures, and programs?

2. Does the learner identify his value system in determining priorities for planning occupational therapy programs?
3. How does the learner identify, organize, and justify value priorities of therapeutic principles for a given client group in identifying program needs?
4. How does the learner identify, organize, and justify value priorities of management principles in planning for organizational change?

b. Affective Application: Characterization: The development of an ethical code of behavior which results in "tendancy to act with consideration of others and their ultimate welfare carried out both in terms of the possible effects over a time-span and on any other people who might be concerned and in terms of a rationally held body of principles as to what constitutes the greatest good for the greatest number" is evident.

Overall Performance Objective: The learner will develop an ethical code of behavior consistent with principles of therapy to be demonstrated in formulating, integrating, and coordinating occupational therapy policies, procedures, and programs and in making required organizational changes.

Suggested questions concerning learner performance:

1. How does the learner state his value hierarchy concerning the effect of his actions on clients and staff members?
2. Does the learner react according to a commonly held code of ethics when others challenge him?
3. How does the learner observe the "confidentiality" of information concerning staff and clients?

c. Affective Application: Development of a Generalized Set: The way an individual "approaches a problem, determines what he will see as important in it, delineates the things which he will take into account in attempting to find a solution, and determines the tenacity with which he clings to the initial perception of the problem".

Overall Performance Objective: The learner will demonstrate a readiness to revise judgments and change behavior in light of evidence when planning, arranging, and conducting research in occupational therapy to confirm or refute current occupational therapy theory or to develop new treatment techniques.

Suggested questions concerning learner performance:

1. How does the learner clarify and state in an organized fashion his reaction to information which might be considered opposite from his point of view?
2. How does the learner state his theoretical assumptions or biases in his approach to a problem?
3. How does the learner display an attitude of "scientific inquiry" in organizing and implementing research projects?
4. How does the learner demonstrate felxibility in accepting a decision or point of view opposite to his after evidence and discussion have determined an opposite course of action?

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULE

1. The Consultant Function: An overview of the role, responsibilities, and ethics of a consultant in occupational therapy.

Overall Performance Objective: 1) To identify and describe the roles, ethics, and responsibilities of the occupational therapy consultant and 2) to analyze, identify, and determine the legal and ethical responsibilities of the consultant in a variety of given situations.

Related Activities in Occupational Therapy: To consult with a variety of facilities concerning occupational therapy programs.

Suggested Objectives:	Examples:
The Learner Should: 1. Given the task of hiring an occupational therapy consultant, analyze the task and form questions about the role and responsibilities of an occupational therapy consultant in terms of job performance and requirements.	Decide whether the problem at hand is one for which you can reasonably seek outside help, or whether it really is one to which you should apply some expertise and authority even at the risk of incurring the irritation of a portion of the public or the governing authority. Insure that the problem has been defined carefully enough to make certain that its solution requires knowledge and skills which do not exist within the organization. Determine if there is temper and will in the organization, and in the community, to put into action the recommendations requiring specific commitments of energy and funds. Establish whether consultants are available who can make useful recommendations in general with the institution's overall goals. Check to insure that there is enough money to hire an expert with required ability for the necessary period of time.

2. Recognize and describe the ethical and legal responsibilities and considerations which an occupational therapy consultant must possess in his job performance.	Professional ethics, contractual responsibilities, etc.
3. Given a case study in which consultant help is required, analyze the situation, determine the responsibilities, and develop a performance contract for the consultant.	

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-144

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULE

2. Health Care Systems and Resources: An overview of health care systems and their relationships to consumers and third-party funding agencies.

Overall Performance Objective: 1) To identify types of health care systems, 2) to identify and discuss types of health care programs within systems, 3) to examine and analyze the needs of health care consumers in the United States, 4) to discuss where and in what fashion consumer needs are being met, 5) to identify the resources for funding and supporting health care programs, 6) to identify legislative and/or third-party regulatory influences for the health care delivery system, 7) to to analyze the roles and functions of health care manpower, and 8) to discuss overlap and interface between allied health manpower groups.

Related Activities in Occupational Therapy: To collect data upon which to base occupational therapy program development; obtain approval and support for planned programs; formulate continuing or clinical education programs; plan, arrange, and conduct occupational therapy research programs; document and publish program and research reports; and find resources for maintaining and improving personal skills and knowledge.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify types of health care systems currently found in the United States.	Hospitals, physican-group practices, industrual or business-sponsored medical groups, nursing homes, community health centers, etc.
2. Identify and contrast the types of health care programs found within these systems and classify types of health care according to what system it usually appears in.	Preventive, acute, restorative, maintenance, etc.
3. List and discuss recognized opinions regarding the specific needs of health care consumers in the United States.	Preventive health care, patient education, rural health care, etc.
4. Analyze the above area (health care systems, types of health care, needs of consumers) and form generalizations and draw conclusions about the health care systems relationship with consumer needs.	

5. Identify and list public and third-party private resources for funding and supporting health care programs and resources.	Consumers, insurance companies, government (federal, state, and local), private endowments, etc.
6. Given specific sources of public and third-party funding and a specific health care program in an institution, describe legislative and regulatory influences and restructions usually a part of the funding process as it relates to occupational therapy.	
7. Identify legislative influences upon the health care system, analyze and discuss their effect upon health care delivery.	Licensure, food and drug laws, liability, etc.
8. Identify manpower groups in allied medicine including subdivisions and their involvement in the total health care delivery systems. Describe each manpower group's responsibilities and functions in each identified health care program.	Manpower Groups: nursing, therapies, technologies, administration, etc. Subdivisions: therapists, technologists, technicians, assistants, aids, etc. Health Care Program: hospital, rehabilitation, community, preventive, acute, restorative, maintenance, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
List, p. B-11

Suggested Resources:
F: 12, p. C-30; 71, p. C-43
REferences, p. C-144

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULE

3. Management in Health Care Systems: Principles, problems, and issues related to future management in health care systems.

Overall Performance Objective: 1) To identify and describe management systems in a variety of health care delivery programs, 2) to discuss future trends in management systems, 3) to analyze and discuss the dynamics of management structure, 4) to identify and discuss current credentialing and labor union requirements, 5) to discuss professional association and labor union relationships with management, and 6) to describe and discuss laws which affect health care management.

Related Activities in Occupational Therapy: To confer with appropriate staff; provide a basis for program development; analyze current management patterns and implement planning for new programs; develop and document program plan; and coordinate program implementation.

Suggested Objectives:	Examples:
The Learner Should:	
1. Describe, compare, and contrast organizational models which are presently used to facilitate health care delivery and discuss his perceptions of whether these systems are adequate to meet future health care delivery needs.	Hospital, community health services, hursing home, school health service, home health care, HMO, etc.
2. Identify and describe management styles, compare and contrast their relative effectiveness in delivery of services and in personnel management.	Autocratic, democratic, etc.
3. Identify general tools and techniques of management commonly used in health care organizations and describe the process of management as it relates to health care systems.	Convergence technique, cost-benefit analysis, CPM, Delphi technique, PERT, PPBS, programming, sensitivity analysis, simulation, etc.
4. List and describe major labor unions and credentialing organizations which represent the manpower in an average health care facility.	

5. Describe and list the major professional requirements of the credentialing associations and identify and list entry requirements of given labor unions.	
6. Analyze the professional and work requirements (identified above) and form generalizations about the effect of these groups on the activities generally carried on in a health care facility and on the relationships of these groups with health care management personnel.	
7. Identify laws which affect health care management, analyze and discuss their effect on health care management.	Liability, federal health care standards, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
List, p. B-11

Suggested Resources:
F: 71, p. C-43
References, p. C-144

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULE

4. Communications in Health Care Systems: An overview of the role of communications in the health care systems.

Overall Performance Objective: 1) To identify verbal and written communication systems within a variety of health care delivery programs, 2) to list and describe the components of each communication system, 3) to identify and discuss effective and ineffective modes, methods, and systems of communication for given purposes.

Related Activities in Occupational Therapy: To prepare and disseminate information in appropriate form to various target audiences.

Suggested Objectives:	Examples:
The Learner Should:	
1. Analyze a number of health care delivery systems to identify written and verbal communication models which usually appear as part of the daily routine.	Berlo, Schramn, Shannon-Weaver, Johnson.
2. List components of each communication model, give examples of communication processes in each.	
3. Analyze communication processes of a given model to determine both effective and ineffective modes and methods of communication and determine how ineffective modes or methods can become effective for a given purpose.	
4. Given a case study of an occupational therapy department in which written and verbal communication incidents are described, produce a plan to organize and improve the communication system.	

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:

- Matching, p. B-9
- Essay, p. B-11
- List, p. B-11

Suggested Resources:

- References, p. C-145

5. The Health Care Facility: Physical and psychosocial components of health care facility design.

Overall Performance Objectives: 1) To identify and discuss the physical and psychosocial aspects of the health care facility as related to architecture, interior design, equipment, materials, and safety, 2) to identify the physical requirements for a variety of types of health care programs, and 3) to identify and discuss architectural design, equipment, and supplies needed for a variety of given occupational therapy programs.

Related Activities in Occupational Therapy: To plan occupational therapy programs; confer with architects and administrators concerning program needs; and develop program budget requirements.

Suggested Objectives:	Examples:
The Learner Should:	
1. Recognize and describe physical and psychosocial aspects of health care facilities in general in terms of architecture, interior design, equipment, materials and safety precautions and form generalizations about the relationship of physical aspects of a building to the psychosocial welfare of the client.	Light, psychological aspects of color and design, privacy, architectual barriers, etc.
2. List and describe major architectural interior design, equipment, material, and safety needs necessary in an occupational therapy setting and state specific physical and psychosocial requirements necessary for a variety of occupational therapy settings and why they are needed.	Space needs per client, storage units, psychological aspects, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
    Essay, p. B-11

Suggested REsources:
    References, p. C-145

6. Health Care Issues: Current issues in the nature and source of health care.

Overall Performance Objective: 1) To identify and discuss current health care issues, 2) to identify the source of the issues, 3) to identify and discuss proposed solutions, and 4) to apply problem solving methods to analyzing the problem and proposing or selecting solutions.

Related Activities in Occupational Therapy: To evaluate community needs and trends as a basis for program development; formulate continuing education programs that meet specific needs; plan, arrange, and conduct relevant research projects; and maintain and improve appropriate personal skills and knowledges.

Suggested Objectives:	Examples:
The Learner Should:	
1. Review major current health care issues in the areas of manpower and delivery and analyze them to determine the ideological and philosophical bases of these issues, who are strong advocates of these issues and why are they presenting and discussing these issues.	Credentialing, career mobility, accessability and acceptability of health care, preventive health care, drug misuse, etc;
2. Identify and list resources which propose solutions to the issues of health care manpower and delivery, state conclusions in his own words, and draw conclusions about the merits of each solution.	federal standards for credentialing socialized medicine, etc.
3. Apply a problem-solving method to analyzing, selecting, or proposing personal solutions to the above issues and write a report delineating these findings.	

Suggested Teaching Strategy:

Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Essay, p. B-11

Suggested Resources:
F: 12, p. C-30; 92, p. C-46
References, p. C-146

7. Curriculum Development: Theories and methods related to the development of curriculum goals and instructional objectives.

Overall Performance Objective: 1) To identify and describe theories of curriculum development, 2) to identify and discuss methods and procedural steps for developing curriculum content, and 3) to identify and describe the essential components of curriculum.

Related Activities in Occupational Therapy: To plan and implement preservice, in service, and continuing education programs.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and explain in his own words current theories relative to the development of curriculum and draw conclusions about the relevance of these theories to the development of curriculum for the education of students and professionals in occupational therapy.	Task analysis for curriculum development, curriculum built around the structure of the disciplines, curriculum oriented to the development of the individual or to the nature of society and enculturation, etc.
2. Define the term "teaching".	Four phased activity: 1) determining societal and community goals, 2) stating behavioral objectives, 3) the act of instru instruction, and 4) evaluation of students' progress and the appropriateness of objectives.
3. Using the above definition of teaching, describe his perceptions of the role of the teacher in performing each component.	
4. Identify curriculum development systems which delineate procedural steps for the development of curriculum goals and objectives, instructional management, and evaluation procedures.	References: Tuckman's structional analysis, Tyler's rationale, taxonomies of Bloom, Krathwohl, and others, the CIPP model of evaluation, simulation model by Donald Cruickshank and others, interaction analysis systems of Hough, Flanders, Anderson and others, etc.

5. Given the task of planning an educational program for a specific group of individuals, develop an outline of curriculum content for the program.

One-week workshop in perceptual-motor evaluation techniques for occupational therapists who are not currently in practice, evening seminar sessions three days a week for one month in activity program planning for aged individuals, etc.

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11

Suggested Resources:
References. p. C-146

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

BASIC INFORMATION MODULE

8. Introduction to Research Methodology: Overview of statistical concepts and methods required for research in health care.

Overall Performance Objective: 1) To identify terminology and statistical concepts commonly involved in health care research, 2) to solve given problems using statistical procedures, and 3) to compare and contrast the uses and limitations of given statistical operations.

Related Activities in Occupational Therapy: To plan, conduct, and report research projects; analyze programs for determination of research needs; and review and evaluate related research literature.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe statistical concepts frequently needed in experimental and non-experimental research.	Basic algebraic and statistical notation, fundamental probability theory, population vs. sample, parameter vs. estimate, descriptive and inferential statistics, classification of variable scales, parametric and non-parametric statistical procedures, etc.
2. Given sets of research data, select and calculate descriptive measures. Compare and contrast the usefulness and limitations of each measure.	Central tendency, dispersion, correlation, etc.
3. Given sets of data, select and calculate inferential measures. Compare and contrast the usefulness and limitations of each measure.	T and z tests, chi square, analysis of variance, etc.
4. Given research reports, analyze and evaluate the statistical procedures used in each.	

Suggested Teaching Strategy:
Student Independent, p. A-8
Direct Communication, p. A-5

Suggested Evaluation:
    Multiple Choice, p. B-9
    Completion, p. B-10
    List, p. B-11

Suggested Resources:
    References, p. C-147

9. Non-Experimental Research Design: Research methodology relative to conducting surveys in the health care system and conducting other non-experimental research.

Overall Performance Objective: 1) To identify and describe the types of methods and techniques for survey research, 2) to list and describe techniques for planning, implementing and evaluating survey research, and 3) to compare and contrast similarities, differences, advantages, and disadvantages of experimental and non-experimental research.

Related Activities in Occupational Therapy: To identify and discuss appropriate research methods; plan, arrange, and conduct research projects; and support or refute current occupational therapy theories.

Suggested Objectives:	Examples:
The Learner Should: 1. Distinguish the different purposes of experimental and non-experimental design and describe the relative advantages and disadvantages of each.	
2. State the steps in survey research and the major consideration at each step.	1. objectives 2. population 3. data 4. degree of precision 5. methods of measurement 6. frame 7. sample selection 8. prototype study 9. field work 10. collection of data 11. analysis of data 12. report of findings
3. Identify and contrast the various sampling techniques in survey research.	Simple random, stratified random, probability, systematic, cluster, subsampling, double sampling.
4. Given survey research designs, develop a survey method and form appropriate to that design.	

5. Identify, explain and compute non-parametric statistical techniques commonly used to evaluate the findings of survey research.	
6. Identify non-experimental research other than survey research and state the purposes of each and define the variables and limitations inherent in each.	Case studies, field studies, descriptive studies, developmental studies, historical studies, longitudinal studies, etc.
7. Given the task of performing a non-experimental research project, plan and implement an appropriate design.	

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Direct Communication, p. A-5
Student Independent, p. A-8

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11

Suggested Resources:
PI: 11, p. C-9; 12, p. C-10; 20, p. C-11; 39, p. C-15

10. Experimental and Quasi-Experimental Research Design: Research methodology relative to conducting scientific experiments in the health care system.

Overall Performance Objective: 1) To identify and describe the scientific method and 2) to list and describe techniques for planning, implementing, and conducting research studies.

Related Activities in Occupational Therapy: To plan, arrange, and conduct research projects in order to support or refute current occupational therapy theories.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define commonly used terms in research.	Research setting, research methodology and research design. Deductive reasoning, inductive reasoning, independent variable, dependent variable, random selection, random assignment, random treatment, hypothesis, selective control, physical control, statistical control, etc.
2. Distinguish the difference between a true experiment and a quasi-experiment and describe the internal influence of each.	True experiment: complete control of all variables exists. Quasi-experiment: selected control of major variables under investigation is exercised.
3. List and explain the steps in the scientific method and the research process and relate the two.	State the problem: conceptualization and delineation of a specific problem. Develop an hypothesis: formulation of conceptual solution (hypothesis) Test the hypothesis: deductive elaboration of measureable consequences, selection of content, and empirical investigation. State results: acceptance or rejection of hypothesis. Use results: utilization of findings.

4. Identify and contrast the classifications of data.	Nominal, ordinal, interval, ratio, etc.
5. Identify the assumptions and limitations of given statistical techniques.	Mean, median, mode, standard deviation, t-test, analysis of variance, Pearson product-moment correlation, regression analysis, factor analysis, etc.
6. Given the task of performing a true or quasi-experiment, apply previous knowledge to plan for and implement a research design, state the generalizability of the findings, and develop a research report.	

Suggested Teaching Strategy:

Student Independent, p. A-8
Teacher-Student Group, p. A-6

Suggested Evaluation:

Matching, p. B-9
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:

PI: 11, p. C-9; 12, p. C-10; 20, p. C-11; 39, p. C-15
References, p. C-147

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION APPLICATION MODULE

11. Group Communication: Communication skills relative to disseminating information.

Overall Performance Objective: 1) To identify and describe input-feedback processes for group communication, 2) to identify and describe information dissemination techniques, 3) to analyze and discuss the effectiveness of each technique for a variety of situations and purposes and 4) to demonstrate an acceptable skill in planning and presenting information to a variety of groups.

Related Activities in Occupational Therapy: To instruct and supervise groups; present papers or reports at conferences or workshops; report in committee or staff meetings; and disseminate information concerning occupational therapy to lay groups.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and describe input-feedback processes for group communication and form generalizations about its applicability to an occupational therapy situation.	
2. Identify and describe information dissemination techniques as related to mass media, groups, or individuals.	
3. Analyze each technique to form generalizations and draw conclusions about its effectiveness for use in an occupational therapy setting.	
4. Given the task of presenting information to a given group, demonstrate an acceptable skill in planning for and using appropriate dissemination techniques.	

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student-Student Group, p. A-7

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
PI: 30 & 31, p. C-13
F: 22, p. C-31; 23, p. C-32; 46, p. C-37; 63, p. C-42
References, p. C-147

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION-APPLICATION MODULE

12. Medical Journalism: Techniques and methods of composing written reports for health care personnel.

Overall Performance Objective: 1) To identify and describe techniques and methods of composing program or research proposals, reports, records, forms, and surveys, 2) to identify the components of each, 3) to demonstrate an acceptable skill in composing reports, records, forms, and surveys for a variety of purposes, 4) to analyze and discuss health care publications or abstracts, 5) to discuss methods or preparing and submitting papers for publication in order to compose program or research reports, and 6) to read and criticize selected writings concerning health care.

Related Activities in Occupational Therapy: To compose program or research plans; apply for funding or support; survey literature for data, compose forms, records, and reports; and compose and submit articles for publication.

Suggested Objectives: Examples:

The Learner Should:

1. Identify and describe techniques and methods commonly used by given health care personnel in the preparation of research proposals, reports, records, and forms.

2. Analyze given proposals, reports, records, and forms to isolate the format, style of writing, and objectives of each. Form generalizations about their usefulness in fulfilling their objectives.

3. Analyze selected articles or papers in health care publications to determine research methology and format generally used to present research findings.

4. Evaluate the validity, reliability and quality of presentation of a given number of health care articles, papers or texts.

5. Perform a related literature search for a topic of his choice, and develop an annotated bibliography.

6. Given the assignment of composing a report on a topic or research project related to health care, demonstrate an acceptable skill in organizing and writing a report and in writing an abstract of the report.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested REsources:
PI: 15 & 16, p. C-10; 24, p. C-12
References, p. C-147

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION-APPLICATION MODULE

13. Group Dynamics: The observation and classification of roles and dynamics of a group.

Overall Performance Objective: 1) To demonstrate an acceptable skill in analyzing, selecting, and assuming group roles appropriate to a given situation and 2) to analyze the dynamics of a given group in sharing in group decisions and tasks in performing necessary behaviors for successful completion of an assigned or group delineated group task.

Related Activities in Occupational Therapy: To participate in action committees; supervise or coordinate action and committees; discuss events or ideas; and reach a decision during staff and committee meetings.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the term "group dynamics".	
2. Identify and describe classical roles and behaviors displayed by individuals in a group and by groups as a whole.	
3. Identify and describe formal observation systems which can be used to observe and analyze groups in an occupational therapy setting.	Interaction analysis, etc.
4. Identify and describe informal ways an observer can observe and analyze a group in an occupational therapy setting.	
5. Given a group situation either in an occupational therapy setting or in some other si situation, use observation systems or informal observation methods to identify and classify individual roles and behaviors which are occurring in the group situation.	

6. Design, use, and evaluate the effectiveness of a form or instrument which can be used to observe, analyze, and classify an individual's behavior in a group or the total behavior of a group.	
7. Describe in detail the behavior which should be displayed by a group leader, a follower in a group, and a consultant to a group.	
8. Given a group situation, assume and display the appropriate behavior called for in each role.	Leader, advisor, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6

Suggested Evaluation:
Completion, p. B-10
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
G & S: 4, [illegible]. C-7
References, p. C-148

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INFORMATION-APPLICATION MODULE

14. Negotiation Skills: The application of appropriate behaviors to the act of negotiating.

Overall Performance Objective: 1) To identify and describe the process and techniques of negotiation and 2) to demonstrate an acceptable skill in negotiating with another individual for a specified purpose.

Related Activities in Occupational Therapy: To obtain funding and support for programs; implement program changes; and determine wages, salaries, and fees.

Suggested Objectives:	Examples:
The Learner Should:	
1. Define the terms related to negotiation and present situations in an occupational therapy setting in which the act of negotiating is an appropriate behavior.	Negotiation and contract ethics, etc.
2. Identify and describe techniques of negotiating commonly used by both labor representatives and management personnel in a health care situation.	
3. Given a situation where the negotiating process is required assume the role and display appropriate behavior of a negotiator.	
4. Given the task of negotiating a grade for a course with an instructor, demonstrate an acceptable skill in negotiating so that both learner and instructor are satisfied with the results.	

Suggested Teaching Strategy:
Student-Student Group, p. A-7
Teacher-Student Group, p. A-6
Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12
Suggested Resources:
References, p. C-148

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION-APPLICATION MODULE

15. Instructional Planning: The application of curriculum and instructional theories and practices to occupational therapy education.

Overall Performance Objective: 1) To identify and describe the instructional needs of given learners, 2) to identify and describe effective teaching strategies and methods in continuing education for health care personnel, 3) to identify and list resources for media, and 4) to demonstrate an acceptable skill in selecting a content area, analyzing and determining educational needs for a given group for that content area, formulating behavioral objectives, planning structional strategies and methods, selecting and obtaining media, implementing an instructional unit, evaluating the quality of instruction, and the quality and quantity of learning.

Related Activities in Occupational Therapy: To select, plan, organize, and implement continuing education programs in health care facilities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Apply previously learned theories and models of curriculum development to determine overall curricular goals and instructional objectives for a given educational program.	
2. Given the task of preparing a course or unit for a group of medical or allied medical students, construct surveys, pretests, or other instruments to determine the instructional needs for the group.	
3. Given a specific assignment to teach a lesson, write behavioral objectives to guide instruction.	
4. Using appropriate personnel or media resources, identify and describe teaching strategies and methods which would be effective in involving students in their own learning process and, given a specific assignment to teach a lesson, apply specific strategies and methods appropriately.	

5. List general resources and media which can be used in a given teaching situation to supplement a selected teaching strategy and method.	Books, resource personnel, filmstrips, 16 MM films, audio and video tapes, opaque projectors, overhead transparencies, 8 MM film loops, etc.
6. Given a specified assignment to teach a lesson, use specific media and resources appropriately.	

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-148

16. Supervisory Planning: The application of supervisory planning skills in program development.

Overall Performance Objective: 1) To identify methods of planning for work assignments, worker evaluation, and worker direction, and 2) to demonstrate an acceptable skill in planning assignments for instructing, directing, and evaluating the performance of a specified group of individuals in a specified task or project.

Related Activities in Occupational Therapy: To plan and supervise worker activities in implementing new programs or research projects.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify and explain methods of planning for work assignments, evaluating worker performance, and providing directions for work commonly used by supervisory personnel in a health establishment.	
2. Using the above information, demonstrate an acceptable skill in planning assignments for instructing, directing, or evaluating workers in the performance of a given task.	

Suggested Teaching Strategy:
Teacher-Student Group, p. A-6
Student Independent, p. A-8

Suggested Evaluation:
Essay, p. B-11
Observational Techniques, p. B-12

Suggested Resources:
PI: 14, C-10
F: 18, p. C-30
References, p. C-149

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION-APPLICATION MODULE

17. Program Planning: The application of skills in research and problem-solving to develop programs relative to occupational therapy.

Overall Performance Objective: To demonstrate an acceptable skill in 1) collecting data for analyzing needs and 2) selecting and planning facilities, personnel, and services to be provided for a specific occupational therapy program.

Related Activities in Occupational Therapy: To be able to plan and implement or revise occupational therapy programs in health care facilities.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given case studies for planning an occupational therapy program for an occupational therapy setting, demonstrate an acceptable skill in collecting data for analyzing needs.	Case studies: nursing home activity program school perceptual-motor screening program day care facility for post-hospitalized psychiatric clients environmental stimulation program for ghetto children Analysis techniques: questionnaires-Delphi, inventory, etc. interviews-structured, unstructured, etc. problem solving - brain-storming, task group, etc
2. Design an occupational therapy program to meet those needs.	Include services to be offered, personnel, space, interior design, equipment, materials, etc.

Suggested Teaching Strategy:
Student Independent, p. A-8
Student-Student Group, p. A-7

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-151

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

INFORMATION-APPLICATION MODULE

18. Applied Research: The application of research skills to plan and implement a research project.

Overall Performance Objective: To demonstrate an acceptable skill in 1) selecting a research problem, 2) conducting surveys of related information, 3) formulating research and evaluation designs, 4) implementing the design, 5) analyzing and evaluating the design and findings, and 6) documenting the project design and findings in order to plan, arrange, and conduct research projects.

Related Activities in Occupational Therapy: To plan, arrange, and conduct research projects to support or refute occupational therapy theories and methods.

Suggested Objectives:	Examples:
The Learner Should:	
1. Given the task of preparing, implementing and evaluating a research project, apply previously learned information in selecting a research problem, conducting a survey of related information, formulating a research problem, selecting a research design, implementing the design, and analyzing and evaluating the findings.	
2. Write a report to disseminate research findings by applying previously learned skills in medical journalism.	

Suggested Teaching Strategy:
Student Independent, p. A-8

Suggested Evaluation:
Observational Techniques, p. B-12

Suggested Resources:
References, p. C-151

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

CLINICAL APPLICATION MODULE

19. Self-Education: Independent study and learning.

Overall Performance Objective: To maintain and improve skills and knowledges about changing concepts and practices in occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Receive instruction in areas of perceived need.	Attend and participate in conferences, workshops, seminars, and training sessions.
2. Review and study materials related to work.	Periodicals, texts, manuals, etc.

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

CLINICAL APPLICATION MODULE

20. Program Planning for Consultee Agencies: Program development for consultee.

Overall Performance Objective: To plan and develop occupational therapy program or project proposals for specific consultee agencies.

Suggested Objectives:	Examples:
The Learner Should:	
1. Examine data on current agency program and rehabilitation needs.	
2. Conduct a trial experience in occupational therapy within the facility.	Determine client needs, methods of occupational therapy function, etc.
3. Develop program and staff proposals.	
4. Evaluate data on variables.	Client load, available space and equipment, needs and priorities of particular client, skills of available staff, budget limitations, organizational problems, etc.
5. Determine consultant time required.	
6. Submit proposed program to agency.	Circulating brochures, writing letters, phoning or arranging conference with consultee, etc.
7. Negotiate proposed program with consultee agency.	Explain procedures for providing services, revise original program where warranted, etc.

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

CLINICAL APPLICATION MODULE

21. Applied Program Development: Applications of program planning to community or institutional needs.

Overall Performance Objective: To formulate, integrate, and coordinate policies, procedures, and programs within the establishment and community.

Suggested Objectives:	Examples:
The Learner Should:	
1. Identify needs for occupational therapy services in the establishment and community.	Review available data on health care trends and community services.
2. Determine new procedures or services needed.	Confer with medical specialists, confer with staff from rehabilitation services, facility or community agencies, etc.
3. Analyze information to identify new methods and procedures that may be implemented.	
4. Identify resources for program expansion.	Evaluate staff as to whether staff is challenged by current program, by observing work patterns and schedules,and conferring with staff. Review computer printouts and other records and reports of the nature and frequency of work load, and examine data to estimate work loads. Plan for expanded services. Establish budget.
5. Analyze current programs and estimate possible future programs.	
6. Analyze fiscal and physical facilities.	Review financial resources, physical facilities, establishment policy, need for staff development, etc.

7. Develop statement of program goals or pilot program.	Plan type of equipment, materials, and space needed. Prepare rough drawing of floor plan. Plan layout of facilities and special physical requirements. Consult with administrator or architect and specify needs. Plan and arrange all teaching activity. Describe job duties and hiring requirements by composing occupational therapy job descriptions. Assist in developing pay scales by conferring with appropriate administrators. Assist in determining fee schedule by reviewing, with administrative personnel, costs to service of staff time, materials, equipment, and overhead. Modify fee schedule on a sliding scale.
8. Apply for funding and support.	Review data concerning available funds, time, equipment, and type of service involved. Confer and consult with administrative staff. Prepare requests for financial grants. Confer with physicians and other specialists and administrative staff. Submit written description of plan and obtain approval and support for program.

22. Continuing Education Program Planning: Educational program development for health care workers.

Overall Performance Objective: To formulate, coordinate, and implement educational programs for specified groups of health care workers.

Suggested Objectives:	Examples:
The Learner Should:	
1. Determine educational needs of groups of health care workers.	Survey workers, compile and analyze data, review results, determine feasibility of meeting needs through an educational program, etc.
2. Plan or collaborate in planning education programs, conferences, workshops, seminars, etc.	Confer with group representatives. Select appropriate methods and program format. Develop budgetary requirements. Negotiate for funds. Compose program and budget proposal. Submit proposal to appropriate agency. Negotiate for speakers or instructors, request participation, discuss and determine fees, contract for speakers, and plan and arrange time.
3. Supervise committees or staff in implementing program plans.	

PREPARATION FOR OCCUPATIONAL THERAPY CONSULTANT

CLINICAL APPLICATION MODULE

23. Research in Occupational Therapy: Applications of research methologies to occupational therapy research problems.

Overall Performance Objective: To plan, arrange, and conduct research projects which relate to occupational therapy.

Suggested Objectives:	Examples:
The Learner Should:	
1. Develop research hypothesis.	Confer with specialists about proposal possibilities and formulate research hypothesis.
2. Review related research projects.	Analyze related data, interpret relationships of reports to proposed projects, etc.
3. Develop research design.	Determine method and means of investigation, compose research proposal, determine method of evaluation, etc.
4. Apply for financial assistance.	Submit application to appropriate source.
5. Implement research program.	Direct research team and coordinate research activities with other activities of clients and staff.
6. Interpret data results.	Compile and evaluate data. Summarize results of study.
7. Document research results.	
8. Disseminate research results.	Submit reports for publication, present results at conference, etc.